

**2023 Kern Ag Foundation**  
**Joe D. Garone Memorial Ag Scholarship – Application Form**

**Name of Applicant:**

First

Middle

Last

**Mailing Address:**

Street Address

City/State

Zip Code

**Telephone:**

Home

Cell Phone

**Email Address:**

**Date of Birth:**

Month

Day

Year

**Name of Parent(s)/Guardian(s):**

Name

Relationship

Phone Number

Name

Relationship

Phone Number

**What school are you currently attending?**

**What school are you planning to attend next year?**

**What will be your college major?**

**After college, what career do you plan to pursue?**

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**Applicant's Family:**

Number of parent(s)/guardian(s)

Number of siblings living at home or in college

Number of siblings currently in college

**For High School Seniors:**

What High School are you attending?

Are you an FFA member?

If yes, please list the name and phone number of your advisor.

Are you a 4H member?

If yes, please list the name and phone number of your leader.

**For College Students:**

What High School did you attend?

What year did you graduate from high school?

What college or university are you currently attending?

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**List any agriculturally related or service organizations you are involved in:**

**Briefly describe your activities:**

**What are your post-graduate plans?**

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**Applicant's Statement:**

Please tell the scholarship committee about yourself including and special family or financial needs that are relevant.