Application Form

John F. Hossle 4-H/FFA Scholarship Due April 15th

| Applicant's Name: (Last) | | (First) | (Middle) | |
|------------------------------|------------------|----------------------|----------|---|
| Home Address: (Street/P.O. | Box) | | (City) | |
| (State) | (Zip) | (Phone) (_ | | |
| County in which the applicar | nt resides | | | |
| Name of 4-H Club or FFA Cl | napter | | | |
| School | | | | |
| Age Date of Birtl | h | Place | of Birth | |
| Parent's Name | | | | |
| Parent's Address | | | | _ |
| Number of brothers and siste | ers | | | |
| What college or post High S | chool institutio | n do you plan to at | tend? | |
| | | | | |
| Please list your hobbies and | interests (incl | ude school activitie | es): | |
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