D'ARBONNE RANGE RIDERS SCHOLARSHIP APPLICATION

RETURN COMPLETED APPLICATIONS AND ALL DOCUMENTS TO:
D'arbonne Range Riders
ATTN: Scholarship Committee
PO BOX 1036
Farmerville, La 71241

Applicant's Name_____

Applicant's Phone #_____

Address_____

_____

Date of Birth_____ Social Security #_____

E-Mail Address_____

Number in Household_____

Mother's Name _____ Mother's Occupation_____

Father's Name _____ Father's Occupation_____

High School _____ GPA _____ ACT Score_____

Expected Graduation Date_____

What College or University do you plan to attend? _____

Major_____ Minor_____

Have you been awarded any other scholarships? _____

By Whom? _____

List any accomplishments and honorary achievements received during your high school career as well as any clubs and/or offices held. Use a separate sheet if needed.

_____

_____

_____

_____

List your hobbies and interests.

_____

_____

_____

What are your future career plans? _____

_____

_____

REFERENCES

Please list three references from a person non-related to you

Full Name_____ Company_____

Phone Number_____ E-mail_____

Years Known_____

Full Name_____ Company _____

Phone Number_____ E-mail_____

Years Known_____

Full Name_____ Company _____

Phone Number_____ E-mail_____

Years Known_____

Employment History

You may list additional jobs on a separate piece of paper if needed.

Company_____ Phone_____

Address_____ Supervisor_____

Responsibilities_____

Company_____ Phone_____

Address_____ Supervisor_____

Responsibilities_____

Essay Prompt: Explain why you are applying for this scholarship, why you deserve to win, and how the receipt of this scholarship will help you reach your career goals. (300 word min)

Attach essay and headshot. Attach letters of recommendation and transcripts or have them mailed to the address above.

Signature_____ Date_____