

North Carolina Association of County Agricultural Agents
Youth Scholarship Application

Name _____

Address _____

City _____ State _____ Zip Code _____

Telephone: Home _____ Cell _____

Applicant's Email: _____

NCACAA District _____ County _____

Parent/Guardian/Grandparent (NCACAA Member) _____

Member's Email: _____

Parents' names: _____

Newspaper name & mailing address: _____

Newspaper's email address: _____

Years in Extension _____ Date of Employment with Extension _____

Check one that applies to you: Graduating High School Senior
 College Undergraduate Student

Name of High School _____ Class Rank/Size _____

GPA (4.0 Scale) _____ ACT Score _____ SAT Score _____

Have you been accepted to a college, university or technical school? Yes No

If no, have you made applications for admission? Yes No

If yes,
Name of University to be attended _____

Type of Degree _____ Major _____

Hours Completed toward this degree _____ Hours Remaining _____

