



MOHAVE LIVESTOCK ASSOCIATION
 P.O. BOX 6578
 KINGMAN, ARIZONA 86402



Mohave County Farm Bureau

SCHOLARSHIP APPLICATION

Student's Name _____ **Date** _____

Address _____ **State** _____ **Zipcode** _____

Phone Number _____ **Cell Number** _____

E-mail Address _____

Current High School or College _____

Current GPA _____

(Please attach your transcript OR letter from guidance counselor.)

Career Path _____

Agricultural Background _____

Community Service _____

Ag events attended and volunteered _____

Achievements _____

Other _____

For the first application:

You may attach any documents or awards to assist MLA/MCFB with granting the scholarship. A resume or short essay is acceptable. We do request 3 letters of recommendation from someone other than a family member. All applications are due by March 31 and November 1 of each year. Please contact a MLA/MCFB member if you have any questions. Subsequent applications only require this one page at the time.