



APPLICATION FORM
FARM CREDIT OF WESTERN KANSAS, ACA
MARK WINGER SCHOLARSHIP

NAME _____
Last First Middle

ADDRESS _____
Street/CO RD City State Zip

CELL PHONE: _____ e-mail: _____

*NAME OF PARENTS, GRANDPARENTS OR GUARDIAN _____

**Note: Must be a current FCWK member*

HIGH SCHOOL CURRENTLY ATTENDING _____

COLLEGE YOU PLAN TO ATTEND (if known) _____

SCHOOL, COMMUNITY ACTIVITIES, HONORS, OFFICES HELD _____

HOBBIES OR SPECIAL INTERESTS _____

IF YOU HELP ON THE FARM OR RANCH, BRIEFLY EXPLAIN YOUR INVOLVEMENT

BRIEFLY DESCRIBE YOUR FUTURE PLANS. In 150-300 words, as an attachment to the scholarship application; please describe how your education will give back to the community and how your plans will help build the future of our area.

REFERENCES (2)

High School Principal _____
Name Address Phone #

High School Instructor _____
Name Address Phone #

Signature _____ Date _____

*** INCLUDE THE FOLLOWING INFORMATION WITH YOUR COMPLETED APPLICATION FORM ***
A HIGH SCHOOL TRANSCRIPT WHICH INCLUDES THE LAST 7 SEMESTERS,
ACT SCORE & SOCIAL SECURITY NUMBER