



Oregon Sheep Growers Association

Scholarship Application Cover

Name: _____ Age: _____

Home Address _____

Permanent Mail Address _____

Home phone _____ School/ cell phone _____

Please indicate whether correspondence should be sent to:

Home address School address

Academic year applied for _____

Class standing during the next academic year:

Sophomore Junior Senior Graduate Student

Previous Education:

High School attended: _____

Year graduated: _____

College/University: _____

Institution you will attend during the scholarship year

Major course studies: _____

Declared Major: _____