



Oregon Sheep Growers Association

Scholarship Application Cover

Name: _____ Age: _____

Home Address _____

Mailing Address(for check) _____

Home phone _____ School/cell phone _____

Academic year applied for _____

Class standing during the next academic year:

Sophomore Junior Senior Graduate Studies

Previous Education:

High School attended: _____

Year graduated: _____

College/University: _____
Institution you will attend during the scholarship year

Major course studies: _____

Declared Major: _____