

(APPLICATION MUST BE SUBMITTED NO LATER THAN MARCH 30)  
James B. & Gladys L. Glover Scholarship Application

1. Applicant shall write application.
2. Any dishonest statement made in the application will automatically disqualify the applicant.
3. Recipients must maintain full time status as defined by the institution for continued eligibility.
4. Recipients must be enrolled in courses that lead to a degree of certificate.
5. Must maintain a cumulative grade point average of 2.5 .
6. Student must maintain a good citizenship.
7. Student must provide proof of enrollment before payment is issued.
8. Student must plan to pursue careers in agriculture or health.

**I have read and understand the above guidelines for applying and receiving a James B. and Gladys L. Glover Scholarship.**

\_\_\_\_\_  
Student's Signature Date

Name \_\_\_\_\_  
Last First

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

Telephone \_\_\_\_\_ Social Security NO. \_\_\_\_\_

Parent's Name \_\_\_\_\_

Address if different than yours \_\_\_\_\_

A letter from someone who can recommend your character and your choice of occupation.

School You Plan To Attend \_\_\_\_\_

Taking \_\_\_\_\_ Semester \_\_\_\_\_

What Vocation are you striving toward? Explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List your school activities \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List you community activities \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Signature of applicant)