

NH STATE GRANGE

GRANGE SERVICES DEPARTMENT
GRANGE SCHOLARSHIP APPLICATION

Name of Applicant _____

Name of Educational Institution _____ Location _____

Major _____ Degree _____

Applicant Address _____

Parent's Address _____

Occupation: Father _____ Mother _____

Names and Ages of Brothers and Sisters _____

Name of High School _____

Name of Home Grange _____ Date Joined _____

Grange Offices Held _____

Give a Brief Summary of High School/College Activities _____

(Attachment if Necessary)

Give a Brief Summary of Grange Activities _____

(Attachment if Necessary)

Estimated Financial Plans For College Activities:

Cost: Tuition _____ Resources: Available Savings _____

Board & Room _____ Help From Parents _____

Books _____ Summer Work _____

Fees _____ Part Time Work _____

Other Fees _____ Help From Other Sources _____

Total Cost _____

Total Available Funds _____

Signature of Applicant _____

APPLICATION IS DUE: July 1st
(APPLICATIONS RECEIVED AFTER JULY 1ST WILL NOT BE CONSIDERED)

Mail To: The Director of the Grange Services Department
Lois Enman, 9 Blake Street, Rochester, NH 03867