



**AMADOR COUNTY FARM BUREAU**  
 AGRICULTURAL EDUCATION SCHOLARSHIP  
 P. O. BOX 159  
 JACKSON, CA. 95642  
 209-295-3366  
 EMAIL: AMADORFB@VOLCANO.NET

APPLICATION MUST BE TYPED & POSTMARKED BY **March 11, 2016**

NAME IN FULL \_\_\_\_\_

First MI Last

PERMANENT ADDRESS \_\_\_\_\_

Street Number Street

City State Zip Telephone

\*COLLEGIATE MEMBERSHIP# \_\_\_\_\_

NAME OF COLLEGE YOU PLAN ON OR ARE ATTENDING \_\_\_\_\_

WHEN ATTENDING \_\_\_\_\_ MAJOR \_\_\_\_\_

NAME OF HIGH SCHOOL ATTENDING(ED) \_\_\_\_\_

List your work experience for the past four years

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

AGRICULTURAL TEACHER LETTER OF RECOMMENDATION

NAME

PHONE NUMBER

\_\_\_\_\_

IF YOU NEED MORE SPACE TO ANSWER ANY OF THE QUESTIONS, PLEASE ATTACH ADDITIONAL TYPED PAGES

SIGNED \_\_\_\_\_ DATE \_\_\_\_\_