

ASB Scholarship Application

I hereby apply for the ASB Scholarship to assist me in an Agriculture or Agriculture Related Program at

\_\_\_\_\_ in the term beginning \_\_\_\_\_.  
(Name of Post Secondary Institution) (Start Date of Program)

Attached is a letter of acceptance and/or another form of proof that I am enrolled at this institution.

NAME \_\_\_\_\_ EMAIL \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

EDUCATION High School Attended \_\_\_\_\_

SCHOOL OR COMMUNITY ACTIVITIES IN WHICH I HAVE PARTICIPATED:

Year	Activity	Position Held (If Applicable)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

COURSE OF STUDIES PLANNED: \_\_\_\_\_

CAREER PLANS UPON COMPLETION: \_\_\_\_\_

NAME OF PARENT OR GUARDIAN: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

NAMES AND ADDRESSES OF TWO PERSONAL REFERENCES:

1. \_\_\_\_\_

2. \_\_\_\_\_

I declare that the above and attached information is correct to the best of my knowledge, and if I am awarded a bursary, I will comply with all related regulations to this application.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

**Submit Applications to:**  
[aboese@beaver.ab.ca](mailto:aboese@beaver.ab.ca) Subject Line: ASB Scholarship Application  
Beaver County Attn: Aimee Boese  
Box 140, Ryley, AB T0B 4J0  
Fax: 780-663-3602