



Agribusiness Association  
**DALE SEYLER SCHOLARSHIP APPLICATION**

(Please print or Type)

**NAME:** MR. \_\_\_\_\_  
MS. \_\_\_\_\_

**DATE OF BIRTH:** \_\_\_\_\_

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

**PHONE:** \_\_\_\_\_  
(Include area code)

**NAME OF PARENT/GUARDIAN:** \_\_\_\_\_

**ADDRESS OF PARENT/GUARDIAN IF DIFFERENT FROM YOURS:** \_\_\_\_\_

\_\_\_\_\_

**PHONE:** \_\_\_\_\_  
(Include area code)

**HIGH SCHOOL ATTENDED:** \_\_\_\_\_

**TOWN:** \_\_\_\_\_

**COLLEGE OF ENROLLMENT:** \_\_\_\_\_

**COURSE OF STUDY IN WHICH YOU ARE ENROLLED:** \_\_\_\_\_

**WHAT IS YOUR GRADE POINT AVERAGE?** \_\_\_\_\_

**HOW MANY QUARTERS/SEMESTERS HAVE YOU COMPLETED?** \_\_\_\_\_

**ACTIVITIES:** (List awards, offices held, etc.; attach extra pages if needed) \_\_\_\_\_

\_\_\_\_\_

**WHAT TYPE OF CAREER ARE YOU PREPARING FOR?** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**PLEASE HAVE AT LEAST ONE INSTRUCTOR, ADVISOR OR COUNSELOR THAT IS FAMILIAR WITH YOUR PERSONAL QUALIFICATIONS WRITE A LETTER OF REFERENCE.**

**SEND THIS APPLICATION AND THE LETTER(S) TO:**

**GARY LEEPER  
3030 WEST 81<sup>ST</sup> AVENUE  
WESTMINSTER, CO 80031-4111**