

2026 Kern Ag Foundation
Joe D. Garone Memorial Ag Scholarship – Application Form

Name of Applicant:

First

Middle

Last

Mailing Address:

Street Address

City/State

Zip Code

Telephone:

Home

Cell Phone

Email Address:

Date of Birth:

Month

Day

Year

Name of Parent(s)/Guardian(s):

Name

Relationship

Phone Number

Name

Relationship

Phone Number

What school are you currently attending?

What school are you planning to attend next year?

What will be your college major?

After college, what career do you plan to pursue?

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Applicant's Family:

Number of parent(s)/guardian(s)

Number of siblings living at home or in college

Number of siblings currently in college

For High School Seniors:

What High School are you attending?

Are you an FFA member?

If yes, please list the name and phone number of your advisor.

Are you a 4H member?

If yes, please list the name and phone number of your leader.

For College Students:

What High School did you attend?

What year did you graduate from high school?

What college or university are you currently attending?

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List any agriculturally related or service organizations you are involved in:

Briefly describe your activities:

What are your post-graduate plans?

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Applicant's Statement:

Please tell the scholarship committee about yourself including and special family or financial needs that are relevant.