APPLICATION OKLAHOMA HEREFORD WOMEN MICHELLE NICHOL'S MEMORIAL SCHOLARSHIP

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Address	City	State	Zip
Phone:	Cell Phone:		
Email address:	Date of Birth:		
Grade Point Average:	SAT Test Score:	ACT 1	Test Score:
ATTACH COPY OF MO	OST CURRENT HIGH SCHOO	OL OR COLLEGI	E TRANSCRIPT
Name of High School:	Year of Graduation:		
List proposed college major ar	nd trade/professional plans:		
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Name of College/University At	ttending:		
College Classification:	Major Field of	f Study:	
During school years, I gained	recognition for (scholarship, a	ıthletic, musical,	etc.):
	, <u>,</u>		

Outside of school, I have pride in these accomplishments:
Include a short essay about why you are applying for the scholarship, your present activities and your plans for the future.
Are you a member of Junior Hereford Association of Oklahoma? Yes No
Are you related to an Oklahoma Hereford Association member? Yes No
If yes, give name and relationship of member
Date:Student Signature: