

Agent Name 5	pencer	Layne		
Agent Number	AC65	,		
Name of High So	hool Jopli	n High	School	

Application for the Shelter Insurance Foundation Agents' Scholarship

This scholarship is offered only to, and the application will only be accepted from, seniors graduating from high schools sponsored by a local Shelter Insurance Agent, which may be confirmed by your principal or counselor.

Section I.	Information to be sup	plied by applicant (Please pri	nt or type)	
Full Name				
	First	Middle	Last	
Date of birt	h			
E-mail add	ress and phone numb	er (with area code) of applica	nt – please print clearly or type	
Full name	of parent(s) or guardia	an(s)		
	ress, mailing address t clearly or type	s, and phone number (with a	rea code) of parent(s) or guardia	an(s) –
occur via e	mail, including the tra In the space belons of which you are a	nsmission of any documentations, briefly summarize your	applicant's parent(s) or guardian(sion. school and community activities Additional information may be atta	s. List
to attend?	•		S. Department of Education, do yo	ou plan
Attendanc	e must begin no later	than the September following	nigh school graduation.)	

Please list all other scholarships, awards, or fine which have been granted for the coming school years.		ch you have applied, and of the	ose,
Name of Financial Aid	alue	Has it been granted to you?	
What is your planned program of college study; w	hat are your educ	cational plans?	
The applicant herewith consents that the Scholar applicant's scholastic standing, character, and other			the
The applicant attests that they are not a natural be employee or contracted agent.	orn or legally adop	oted child of any Shelter Insurar	ice _®
	Si	gnature of Applicant	-
After you have completed your part of this counselor. Your principal or counselor Foundation Agents Scholarship Selection	r will deliver	it to the Shelter Insurar	
Section III. Information to be supplied by princip	al or counselor		
This is to certify that the above applicant ranks Date of high school graduation will be taken the following college entrance examination		The applicant	has
Name of Test:		Score:	
Dated this day of	,,	·	
	Signature	of Principal or Counselor	
	Joplin		
		ne of High School	
	2104 India	Mo 64804	
		ess of High School	
	Spence		
		helter Insurance® Agent	
	ACQ	Agent #	
		. 190111.11	