



Washington State Grape Society
6601 W. Deschutes Ave., Suite C-2.
Kennewick, WA 99336
509-585-5460; kimb@agmgt.com

WASHINGTON STATE GRAPE SOCIETY - MEMORIAL SCHOLARSHIP FUND

Personal Information Sheet (2 pages)

Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Email: _____ Phone: _____

What will be your status in the fall : Undergraduate / Professional Certificate Graduate

Institution : _____

Major / Program: _____

Program Start Date: _____ Anticipated Graduation Date: _____

Educational Background

Institution (start with high school)	City, State	Start Date	Graduation Date

Career Plans

After completing your degree or program, what are your career plans?



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List your major activities, achievements and honors which indicate scholarship and leadership at the following:

School:

Community:

Profession / Other:

Signature of Applicant

The information which the Scholarship Committee has obtained for awarding of scholarships will be held in the strictest confidence and shall be employed for no other purpose.

Deadline March 31st

Return to: Washington State Grape Society, 6601 W. Deschutes Ave., Suite C-2, Kennewick, WA 99336
or via email: kimb@agmgt.com