CHISAGO LAKES-GERMAN FARMERS MUTUAL INSURANCE COMPANY 21150 Ozark Ave N, PO Box 189 Scandia, MN 55073 PH: 651-433-4805 FAX: 651-433-5746 Email: manager@clmic.com Website: www.clgfmutual.com

SCHOLARSHIP INFORMATION

- FOR: Members or dependents of Chisago Lakes-German Farmers Mutual Insurance Company (CLGF) policyholders.
- RULES: 1. Eligibility based on academic and vocational achievement and service to school and community.
 - 2. Scholarship must be used within 12 months of award.
 - 3. Funds will be paid directly to the individual by the Company and should be used for tuition and/or supplies.
 - 4. Scholarships grants in any one school year are for \$750. While each application is good for only one year, you are welcome to apply in subsequent years. A maximum of three (3) scholarships will be awarded to any one student.
 - 5. Selection will be made by a committee of the Chisago Lakes-German Farmers Mutual Insurance Company.
 - 6. Applications must be postmarked by April 1, 2023.
- AWARDS: 1. Scholarships awards will be made on or about May 1, 2023.
 - 2. Scholarship recipients will be notified by May 15, 2023.

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APPLICATION FOR SCHOLARSHIP

Name(last)	(first)	(middle	(middle)	
Address	(IIISt)	(inidule)	
Address(street)	(city)		(zip)	
Date of Birth	Telephone Numb	er		
EDUCATION INFORMATION:				
High School Attended		Graduation Date		
Address		Tel. Number		
Grade Point Average	Class Rank_			
Name and address of post-secondar	ry institution for which s	scholarship is ap	plies for:	
(name)				
(street)	(city)	(state)	(zip code)	
Is this institution accredited? (chec	ck one) Yes	_No		
Institution is a (check one) Four-	-year college/university_	Technica	Technical college	
Com	munity college	Other		
Applicant to be enrolled (check one	e): Full-time	Part-time	2	
Field of study				
FUTURE PLANS:				
Please print or type a brief paragrap career objectives and goals.	ph describing your futur	e plans as they r	elate to your	

SCHOOL ACTIVITIES:

Please list school activities in which you have actively participated during the past four years. Include your areas of participation in each activity and any awards or honors earned.

COMMUNITY ACTIVITIES:

Please list community activities in which you have actively participated during the past four years. Include your years of participation in each activity and any awards or honors earned.

WORK EXPERIENCE:

Scholarship applicants, or their parents/guardians, must be members of Chisago Lakes-German Farmers Mutual Insurance Company. By signing below, the applicant certifies that all listed information is true and correct.

Signature_____Date____