	APPLICANT INFO	ORMATION			
Full Name:					
Last	Frist		MI	Date	
Permanent Address:					
Street Address			Apartment/Unit #		
City			State	Zip Code	
Phone:		Email:			
	EDUCAT	ION			
High School Attended:		City,	State:		
Year Graduated:	Cumula	ative High S	chool GPA:		
College (if applicable):	Addr	ess:			
Cumulative College GPA:	Last	Term Colle	ge GPA:		
Total expected college credits	at end of this sch	nool year: _			
Mailing address during schoo	l year:				
	Street			Apt/Unit #	
City		State		Zip Code	
	GOALS AND IN	TERESTS			
Proposed major in college:					

1. Please elaborate on your specific interest in the vegetable industry, where it comes from and your future goals:

2.	. List activities, honors, awards (incorganizations). An additional she High school / College:		
	Community Activities:		
	Other:		
3.	. On another sheet of paper, in no would bring to the Oregon vegeta directly relates.	-	· -
		ELATED TO THE AGRICULTUR ABLE INDUSTRY	AL OR
Empl	loyer or supervisor:		T- (4-1-)
	Name	From (date)	To (date)
Addre	ress: Street		
	Silect		
City		State	Zip Code

Duties:		
Employer or supervisor:		
Name	From (date)	To (date)
Address:		
Street		
City	State	Zip Code
Duties:		
	DISCLAIMER	
	e above information is correct and gr ble Commission to release informati agencies and the media.	
Signature	Γ	Date