



Jeffrey L. Bleck, DVM • Christopher D. Booth, DVM • Kent R. Bindl, DVM • K. James McGowan, DVM  
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## Dairy Doctors Veterinary Services Scholarship Application

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

High School: \_\_\_\_\_ GPA: \_\_\_\_\_

College Attending: \_\_\_\_\_

Start Date: \_\_\_\_\_ Major: \_\_\_\_\_

Place(s) worked: \_\_\_\_\_ 2) \_\_\_\_\_

Start date: \_\_\_\_\_ End date: \_\_\_\_\_ Start date: \_\_\_\_\_ End Date: \_\_\_\_\_

Activities participated in during high school:

Activities participated in outside of school:

Awards and Accomplishments:

Future Career Goals:

Use additional paper if necessary