



## GRANGE INSURANCE ASSOCIATION SCHOLARSHIP APPLICATION

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

Street Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ ZIP: \_\_\_\_\_ County (i.e. King): \_\_\_\_\_

Phone Number: ( ) \_\_\_\_\_ Alternate Phone: ( ) \_\_\_\_\_

Name of Father/Guardian: \_\_\_\_\_ Name of Mother/Guardian: \_\_\_\_\_

Address of Parent/Guardian if different from yours:  
\_\_\_\_\_  
\_\_\_\_\_

Are you applying for an Academic or Vocational scholarship?

**Academic** – Pursuing College Diploma

**Vocational** – Technical/Career Education & Training

High School, College or Technical Institute currently attending (Include City, State, & Zip)  
\_\_\_\_\_  
\_\_\_\_\_

Two-year/four-year College or Technical Institute you're planning to attend (Include City, State, & Zip)  
\_\_\_\_\_  
\_\_\_\_\_

Expected Major: \_\_\_\_\_

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**You must meet one of the following to be eligible:**

1. Are you or your parents/legal guardian currently policyholders of GIA?  
(in California, Colorado, Idaho, Oregon, Washington or Wyoming) Yes  No   
If yes, policy number \_\_\_\_\_
2. Are you or your parents/legal guardian currently employed at GIA? Yes  No   
If yes, name of GIA employee? \_\_\_\_\_
3. Are you a previous recipient of a GIA scholarship? Yes  No

Are you a child of an officer or director of GIA? (*If yes, you are ineligible*) Yes  No

How did you hear of our Scholarship Program? \_\_\_\_\_

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Attach **Official** Grade Transcript (High School, college, and continuing vocational students must attach most recent **official** transcript.)

Your current GPA: \_\_\_\_\_

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If I am selected as a recipient of this scholarship, I give my consent to GIA to publish my name and photo in press releases and other communication promoting the GIA Scholarship Program. Please do not send a photo with the application, a photo will be requested if you are awarded a scholarship.

Signature \_\_\_\_\_ Date \_\_\_\_\_