

Andrew County Mutual Insurance Scholarship

Name:	Current GPA:
Insured's Family Members Name:	
Planned Major/ Certification Program:	
1. What are your specific education plans and career goals?	
	
	
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2.	How have you gotten involved in your school to make it a better place and/or your community? Do you volunteer, work full-time, or part-time as well as involved in school activities? Please list all you have participated in and still are in.
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3.	Please describe a personal accomplishment that you have achieved. What are some strengths and skills that were used to achieve it?
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•	What is a significant change or experience that has occurred in your life? How did you respond to this? What did you learn about yourself from that experience?
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5. Each student has a unique history, educational goals, and plans for the future. What would it mean to be offered one of our ACM scholarships? How would it benefit your future endeavors	;?
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6.	Please list any additional information you would like to tell us below.
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You can submit this application to the email, acm@andrewmutual.com, or bring to the office, 422 Court Street, Savannah, MO 64485. Please include a copy of your transcripts. If you have any question please call Kailea Nauman, 816-324-3151. Thank you for your submission.