

## Mounted Patrol of San Mateo County Foundation 521 Kings Mountain Road Woodside, CA 94062-4209

## The Hon. Bill Lane Scholarship Application 2025

## PERSONAL INFORMATION

Name:					
		First	[Middle]	Last	[Suffix]
Permanent Address:					
City, State, Zip Code					
Telephone:					
E-mail:					
Gender:	Male _		Female		
Date of Birth:		MM / DD /	YYYY		
Expected Graduation Da	te:				
Photographs:			close with your app nd your animal(s).	lication two differe	nt clear photographs o
EDUCATION I	NFOR	MATION			
School you pla attend in 2023					
Campus Locat	ion:				
Planned Major Area of Study:	or				
Most Recent High School:					

City. State:	
Dates Attended:	Beginning – End Dates (MM / YYYY)
Graduation Date:	
High School Transcript:	Please include with application or send separately.
EXTRACURRICULAR A	ACTIVITIES
	munity unpaid activities. Please indicate the year(s) in which you vity. An additional page may be attached to this application if necessary. most recent activity.
Description of Activity:	
_	
Dates:	Beginning – End Dates (MM / YYYY)
Your Position or Title (if applicable):	
Most Significant Contribution:	
WORK EXPERIENCE	
Include past and present	t employment. Submit additional sheets using this format if necessary.
Place of Employment:	
Dates:	Beginning – End Dates (MM / YYYY)
Job Duties:	

Hours:	
Supervisor:	
HONORS & SCHOLA	RSHIPS
May be related to scho sheets using this forma	ool, extra-curricular activity, military service, or other. Submit additional at if necessary.
Name of Award	d:
Date Received	<u> </u>
Sponsoring Organization:	
Reason for Receiving Awa	rd:
ESSAY	
	inal essay (500 words or more) on your educational goals, and how these e horsemanship and the western lifestyle that Bill Lane cultivated through s.
<b>CERTIFICATION</b> - To	Be Signed By Each Applicant
provided on this applic and true to the best of in revocation of my ap	stand the enclosed information. I affirm that the information which I have ration form and any additional material that I submit is complete, accurate, my knowledge. I understand that furnishing false information may result plication for scholarship. I understand that the Mounted Patrol of San tion has the right to use my image and my essay in its promotional
I authorize my school of Patrol of San Mateo C	officials to give information about my academic records to the Mounted ounty Foundation YES NO
Applicant Signature:	
Parent/Guardian:	
Date:	