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

The Hon. Bill Lane Scholarship Application 2022

PERSONAL INFORMATION Name: [Middle] [Suffix] First Last Permanent Address: City, State, Zip Code Telephone: E-mail: Gender: Male ____ Female ____ Date of Birth: ____ MM / DD / YYYY Expected **Graduation Date:** Photographs: Please enclose with your application two clear photographs of yourself and your animal(s). **EDUCATION INFORMATION** School you plan to attend in 2022-2023: Campus Location: Planned Major or Area of Study: 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	CTIVITIES
	nunity unpaid activities. Please indicate the year(s) in which you ity. An additional page may be attached to this application if necessary, lost 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	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 form	ool, extra-curricular activity, military service, or other. Submit additional at if necessary.
Name of Award	d:
Date Received	:
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.
CERTIFICATION - 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
	officials to give information about my academic records to the Mounted ounty Foundation YES NO
Applicant Signature:	
Parent/Guardian:	
Date:	