Texhoma Wheat Growers 2026 Scholarship Application



Date:	·		
Name:			
First	MI	Last	
Address:			
Street/PO Box	City	State	Zip Code
Email Address:			
Phone #:	D.O.B.		
High School:	GPA	: Class Ra	ank: of
Name of School/College you plan	to attend:		
Major:		ACT Score: _	
Have you been accepted to a coll	lege yet? If So, Where	?	
A copy of your resumeEssay of chosen topicWrite an ess	ay, no more than two (2) pag	es, following a topi	c below:
What changes do you foresee fo	r the agricultural industry in	the next 10 years?	•
What role do you see Texhoma \		•	
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The deadline for this application Growers.	on is April 30, 2026. The winn	er will be notified b	y Texhoma Wheat
pplicant's Signature		·	_ Date:
Pleas	se mail completed applicatio	n and forms to:	
	Texhoma Wheat Grov	vers	
	P.O. Box 10018 Texhoma, TX 7396)	
	Office use only		
Received by:			
Ch I. II	,		-