

Highland Lakes Master Gardener Association Scholarship Application for Current College Students

Applicant Contact Information					
Please Print Legibly:					
Name:					
Primary Reside Address:	ence				
	State: Zip:				
County:					
Cell Phone:	Home Phone:				
Email:					
Please provide	most current college mailing address:				
City:	State: Zip:				
	Date of Submission				

	Association Scholar e print legibly in bl		
Full Name of Applicant:			
Age:		Date of Birth:	
County (Primary Residenc	e):		
College/Unive	ersity or Technical I	Institution Information	
Are you enrolled in a Colle	ge/University or T	echnical Institution? Y []	N[]
Name of College/Institutio	on you currently at	tend:	
	e expressed either as ale, such as, 3.25/4.0	<i>a numerical percentage; such as</i> scale. <i>GPA should be stated as</i> o	
College/Institution Registr	ar Phone:		
Address:			
City:	State:	Zip:	
Major Field of study:			

<u>Please attach a copy of your college transcript</u> (as of March 31st, of the current year)

Tell us about YOU!

1. Please list any horticultural/agricultural related organizations or projects you have been involved in. Begin with most recent year.

Year	Activity/Purpose/Accomplishments	Time Spent	Organization

2. List any leadership positions held in an organization, committee or project.

Year	Leadership Role	Org/Committee/Project

Service Projects/Results/Role	Time Spent
	Service Projects/Results/Role

3. List any other community service projects you have been involved with:

4. List any other extra-curricular activities you have been involved with (athletics, Intramural clubs, etc):

Year	Activity	Time Spent

5. Anything else we should know about you?

6. Personal narrative (can be typed and attached): Tell us why you are pursuing a horticultural, agricultural or related field of study. Include your future career goals, who and/or what inspires you (in 500 words or less):