



**Highland Lakes Master Gardener Association  
Scholarship Application  
for Current College Students**

Current College Student Applicant Certification and Checklist

Applicant Certifies:

- Attached completed application.
- Attached a valid copy of degree program (graduation requirements, # of hours, etc.) for which you are registered and/or enrolled.
- Attached copy of most recent transcripts (as of current year).
- If requested, will interview with the HLMG Association selection committee by phone.
- If selected, agrees to attend stated university, college or technical institution as designated on the scholarship application.
- If selected, agrees to let Highland Lakes Master Gardeners utilize your photo in promoting the HLMG Association Scholarship Program. (Optional, do not check if you do not want your photo taken to promote the HLMG Association Scholarship Program).

I, \_\_\_\_\_, certify that the information provided is correct and truthfully reflects my personal activities, academic background records and future education plans. I agree that if any information that I have provided is found to be false in any way, my application will automatically become null and void.

Applicant signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Incomplete applications are disqualified.*



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Applicant Contact Information

**Please Print Legibly:**

Name: \_\_\_\_\_

Primary Residence  
Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_

County: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Please provide most current college mailing address:

\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Date of Submission

\_\_\_\_\_

HLMG Association Scholarship Application  
(Please print legibly in black or blue ink)

Full Name of Applicant: \_\_\_\_\_

Age: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

County (Primary Residence): \_\_\_\_\_

College/University or Technical Institution Information

Are you enrolled in a College/University or Technical Institution? Y [ ] N [ ]

Name of College/Institution you currently attend:

\_\_\_\_\_

Current GPA\*: \_\_\_\_\_ As of: \_\_\_\_\_

*\*Grade Point Average should be expressed either as a numerical percentage; such as 98% or as a ratio which includes the scale, such as, 3.25/4.0 scale. GPA should be stated as of the last completed quarter or semester.*

College/Institution Registrar Phone: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Major Field of study: \_\_\_\_\_

Degree(s) sought: \_\_\_\_\_

Please attach a copy of your college transcript (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

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

Year	Service Projects/Results/Role	Time Spent

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):