



ONLA Scholarship Application

Please complete the application in full.

Date of application _____

Student's Full Name _____

Maiden/Other Name _____

Permanent Address _____

City / State / ZIP _____

Telephone Number _____

Email Address _____

Cell Phone Number _____

Name of University / College at which you are enrolled _____

Location of University / College at which you are enrolled _____

Course of study you are pursuing and current GPA _____

Anticipated graduation date and degree _____

High School Name, City and State _____

High School Graduation Date, GPA and honors _____

Please list any post-secondary educational experience, _____

including dates of attendance as well as institution _____

names, city/state, GPA and honors _____

Please list any horticulturally-related work experience _____

including positions, dates and company names _____

Please list two educational references (advisors, professors) _____

name

telephone position / title

email address

name

telephone position / title

email address

Please list information about any employment and/or career plans you have, if any, for the award period you are applying for assistance

Please list information about your involvement in extra-curricular activities, civic groups, voluntary organizations, etc.

Please list information about your leadership abilities and activities in which you have demonstrated leadership abilities.

Please list information about your achievements and accomplishments.

Please list any special financial circumstances or needs. (optional)

Your application must be signed and dated in order to be placed into consideration.

signature

date