



Jim Sanders Memorial Scholarship Application



Date of application _____

Student's Full Name _____

Maiden/Other Name _____

Permanent Address _____

City / State / ZIP _____

Telephone Number _____

Email Address _____

Cell Phone Number _____

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, during the award period for which are applying

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)

ESSAY: Please attach your essay to this application (in similar format if digitally delivered). Your answer must be typed with 1" margins, double spaced in size 12 font, and no more than 2 pages long. **PROMPT:** *Please share your future plans in the horticulture industry, how they relate to your education and experience, and what legacy you wish to leave to future generations.*

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

signature

date