## **OHIO STATE UNIVERSITY EXTENSION**

## **2018 GREENE COUNTY**

## MASTER GARDENER SCHOLARSHIP APPLICATION

The Master Gardeners of Greene County is a volunteer organization teaching environmentally sound, research based gardening and horticultural related practices to the citizens of Greene County under the auspices of the Ohio State University Extension Office of Greene County.

The organization will award a \$1,000 non-renewable scholarship to a deserving current year high school graduating student or college freshman. The student must be a resident of Greene County pursuing higher education within Ohio at an accredited technical school or in a 2 or 4 year college/university. The student must major in a field of study related to horticulture, turf management, landscape design or technology, soil science, entomology, pest management, botany-plant pathology, forest management or environmental sciences.

This application form, three letters of reference (explanation on page 2), and an official copy of your high school transcript (including the first semester your senior year) or an official copy of your first semester of college transcript if you are a college freshman are due or postmarked by March 16, 2018. The <u>application</u>, reference letters and transcript should be included in a single packet and returned to:

Master Gardener Scholarship Program OSU Greene County Extension 100 Fairground Road Xenia, OH 45385

The winning applicant will be notified by mail or telephone. The scholarship will be paid in two semiannual \$500 installments to the student's account at the technical school or college/university where the student is enrolled. In addition to the written application form, the finalists will also participate in an interview with the scholarship committee. The information below may be typed or hand printed. The information on page two should be completed on a separate sheet(s) of paper.

Name:		Date of Birth: _	
Address:			
Phone:	Email:		
High School/College Attending:			GPA:
Technical school, college, or univers	sity preference:		
Intended course of study:			



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Please provide name, phone number and /or email address and position/title of three adults (including one high school guidance counselor or teacher) who may be contacted as references (employer, minister, neighbor, etc.). These may be the same names who provide the letters of reference. Family members may not

participate.	
Reference names:	1
	2
	3
Complete the follow	ving on a separate sheet(s) of paper:
	e a brief description of the involvement of all your extracurricular and community activities high school years – include any honors or awards you have received. Limit to 150 words.
	periences, including any work, 4-H or FFA projects, etc., that have influenced your decision ducation in your intended course of study. Limit to 250 words.
Describe the words.	e career field you are pursuing and explain why you will succeed in this area. Limit to 250
Please sign and da	te below certifying that the information provided is true to the best of your knowledge.
Signature:	Date:
Print full name:	

