

2024 Leon County Master Gardener Scholarship Application

SCHOLARSHIP SPECIFICS:

- Two (2) \$1500 scholarships will be awarded.
- Scholarship will be paid directly to the institution of higher learning for the benefit of the recipient at the end of the first completed regular semester of college. Applicant must take and complete a minimum of 12 hours during the semester and maintain a minimum of 2.5 grade point ratio. Applicant will lose the scholarship if not used by the end of the fall semester of 2025. In order to receive the funds the recipient must provide the Leon County Master Gardener Treasurer an official copy of the transcript following the completion of his or her first semester of college and a copy of their schedule for the current semester showing enrollment as a full time student.
- Applicant must complete the semester or return the scholarship funds to the Leon County Master Gardener Association.

ELIGIBILITY REQUIREMENTS:

- Must be a graduating High School Senior this spring that plans to enter a college, university or trade school no later than the fall semester of the current year.
- Must meet all requirements of the college, university or trade school chosen.
- Must have maintained at least an overall grade average of 80 for 7 semesters.
- Must be of good moral standing and shall not have been convicted of any felony criminal offense.
- Must have been involved in 4-H or FFA for a minimum of three (3) years.
- Must include a copy of the applicant's Official High School Transcript as well as SAT and/or ACT test scores.
- Must provide a copy of the FAFSA Student Aid Report (SAR).
- Must provide two (2) letters of recommendation. Only one (1) letter may be from a teacher, principal or counselor. The letters should be from adults who are not related to the Applicant.
- Please include a wallet sized portrait of yourself with this application. This picture is for publication purposes and will not be used in the judging process.

DEADLINE FOR APPLICATION:

- Application must be postmarked no later than **April 1, 2024. NO FAXED OR EMAILED APPLICATIONS WILL BE ACCEPTED.**
- Scholarship Recipients will be announced no later than **May 1, 2024.**

APPLICATION CAN BE MAILED TO:

Leon County Master Gardener Association
Attn: Scholarship Committee
PO Box 188
Centerville, Texas 75833

Please provide all information requested. Do not add pages to the application.

**COMPLETED APPLICATIONS AND OTHER REQUESTED DOCUMENTATION MUST BE MAILED TO
THE ABOVE ADDRESS.**

FAXED OR EMAILED APPLICATIONS WILL NOT BE ACCEPTED.

Date: _____

Name of Student: _____
First Middle Initial Last

Age: _____ **Date of Birth:** _____

Phone: _____ **Alternate Phone:** _____

Address: _____

City, State and Zip: _____

NAME AND ADDRESS OF PARENT(S) OR GUARDIAN(S):

	Name	Occupation	Address
Father			
Mother			
Guardian			
Guardian			

OTHER DEPENDENT CHILDREN:

Name	Age	Grade

Will any siblings attend college during the same period as the Applicant: YES NO

HIGH SCHOOL INFORMATION:

High School Attended: _____

Address of High School: _____

City, State, Zip: _____

Applicant's Rank in Graduating Class: _____ out of _____

High School Grade Point Average through last completed semester (GPA).

_____ (Based on 4.0 scale)

Applicant's highest SAT and/or ACT score(s): _____ SAT _____ ACT

INCLUDE A COPY OF THE APPLICANT'S OFFICIAL HIGH SCHOOL TRANSCRIPT SHOWING SAT AND/OR ACT SCORES.

RESIDENCE INFORMATION:

I live at home with my parents.

I live in a single household with my _____.

Other, Please explain if you live with a guardian, grandparent or have another situation.

COLLEGIATE INFORMATION:

Name of University you plan to attend: _____

Major chosen for your Baccalaureate Degree: _____

What is your preferred career choice? _____

Why have you chosen this career? (A minimum of 25 word essay.)

PLEASE LIST YOUR CONFIRMED SCHOLARSHIPS:

Scholarship Name	Amount	Confirmed or Pending

PLEASE USE THIS SPACE TO TELL US WHY YOU NEED FINANCIAL ASSISTANCE TO ATTEND COLLEGE. (*A minimum of 25 word essay.*)

AMOUNT YOU HAVE SAVED TOWARD YOUR EDUCATION: \$_____

LEADERSHIP INFORMATION:

(Please use this space to list major activities you have participated in and honors you have earned.)

A. 4-H and/or FFA LEADERSHIP ACTIVITIES:

B. OTHER LEADERSHIP ACTIVITIES:

COMMUNITY SERVICE INFORMATION:

A. 4-H and/or FFA COMMUNITY SERVICE PROJECTS:

B. OTHER COMMUNITY SERVICE PROJECTS:

Please attach a narrative (no more than 2 pages) detailing what your education and career goals are and how you will strive to be a success.

Please check to make sure the following information is included with your scholarship application:

_____ ***Letters of recommendation – Only one (1) from a teacher, principal or counselor. The letters should be from adults who are not related to the Applicant.***

_____ ***Official High School Transcript – Transcript should include your SAT and/or ACT scores and class rank.***

_____ ***Attached a copy of the FAFSA Student Aid report (SAR).***

_____ ***Attached a wallet sized portrait for publication purposes.***

_____ ***Signature of Parent(s) or Guardians(s).***

_____ ***Signature of Applicant.***

*****Once you have completed this application, print it and then provide all the signatures below.***

I have read the requirements and terms fo this scholarship application and agree to abide by its terms.

Applicant's Signature

Date

I verify that the information in this Application is true and correct.

Signature of Parent or Guardian

Date

Applications must be postmarked no later than April 1, 2024, to:

Leon County Master Gardener Association
Attn: Scholarship Committee
PO Box 188
Centerville, Texas 75833