



The Garden Club of Manchester Vermont
P.O. Box 788
Manchester Center, Vermont 05255

Scholarship Application

Name:

First

Middle

Last

Home (Legal/Permanent) Address: _____

Address

Town

State & Zip

Student email: _____ Date of Birth: _____

Current School: _____ Contact Person: _____

Parent/Guardian Name(s): _____

Address: _____ Phone: _____

Parent/Guardian e-mail: _____

Educational Institution to be attended: _____

(Your address at end of semester is necessary to send notification and required information/forms)

Year you expect to graduate: _____ Curriculum to be pursued: _____

School website: _____

State why you feel you deserve this scholarship:

Have you applied for other scholarships? Yes No

If yes, explain in detail which scholarships have been requested and if you have been chosen to receive one.

Are you employed? Yes No If yes, name of employer: _____

State name of prior employers and periods of employment:

Extra-curricular activities: _____

Participation in school clubs/organizations: _____

Personal references (not relatives):

Name: _____ Address: _____

Name: _____ Address: _____

Using a separate sheet of paper, write in your own handwriting a concise statement of why you want to pursue your education further and state your specific career goals.

Signature of Applicant: _____

Signature of Parent of Guardian: _____

I, _____, have read the foregoing application and hereby state with my knowledge that _____ is applying for a scholarship in the amount of \$1,500.00 from the Garden Club of Manchester, VT, to further his/her education in the field of _____

THIS SCHOLARSHIP WILL BE GIVEN UPON SUCCESSFUL COMPLETION OF THE FIRST COLLEGE SEMESTER AND SUBMISSION OF A 2ND ENROLLMENT OF A FULL TIME STUDENT.

Please send completed application by April 30, to

Carolyn Smith
Scholarship Committee Co-Chair, GCM
PO Box 500
Manchester Center, VT 05255