



# **Jackson County Master Gardeners**

## **Scholarship Application**

For a Senior of the Edna, Ganado or Industrial High School Class of 2021

Due April 16, 2021 to Jackson County AgriLife Extension Office

411 N Wells, Edna, TX

#### **Personal Information**

Recipient shall be pursuing	a career in horticulture or an agric	cultural field.	
Applicant:			
(Last)	(Firs		(Middle)
No. of Years in any club or	organization (4-H or FFA, etc.)		
Home Mailing Address:			
Telephone No.()			
Place and Date of Birth:			
	Family Inform		
Name of your			
Parents/Guardians:			
Address of your			
Parents/Guardians:			
No. of Brothers:	List their ages:		
No. of Sisters:	List their ages:		
Are any of your brothers o	r sisters attending college now or v	vill any of your bro	others or sisters be attending
college at the time you are	attending?		

#### **College Plans**

University or college you plan to			
attend:			
	Have you been accepted?		
Will you live at home?	_ In a dorm?:	In an apartment?:	
Will you be working to help with e	xpenses?	If so, where?:	
Degree course in which you plan t	o major:		
In which college/department of th	e university is the	degree course offerea:	
State specific reasons why you pla	n to study at this u	niversity or college and in this field.	
1			
2			
3			
What is your current preferred car			

### **Scholarship Criteria**

Requirements of Candidate

- --- current resident of Jackson County
- --- candidate must be registered in the fall semester following high school graduation
- --- Must be registered for a minimum of 12 semester college hours & show proof of registration by receipt
- --- This scholarship will not prevent the student from receiving other scholarships
- --- The amount of this scholarship is \$500.00

#### **Essay by Applicant**

(to be attached to this Application)

Requirements of essay to complete this Application:

- --- minimum of one page
- --- typed
- --- double spaced
- --- type size 12
- include any and all club work with number of years enrolled, names of clubs, leadership activities (offices held and projects) with number of years and names of offices or projects
- --- include all 4-H or FFA demonstrations and team participation with number of years and names of demo or teams (if applicable)
- --- include all 4-H, FFA, or other citizenship activities with number of years and names of activities
- --- include the most important recognition and honors important to you and when received
- --- include school, church, and community service activities in which you participated
- --- what are your goals in life

## **Scholastic Record**

#### **High School**

(to be completed by Applicant's High School Counselor , Principal or Teacher)

Applicant:					
Date to be graduated:	Month	Year			
No. of students in graduati	ng class:				
Brief statement by High Sch	nool Principal, Counselor (	or Teacher regarding applicant:	(use this space only)		
Date:	Signed.				

Principal, Counselor or Teacher