



VIRGINIA FEDERATION OF GARDEN CLUBS, INC. (VFGC)

APPLICATION FORM FOR SCHOLARSHIP

Date: _____

Please type or print:

Name in Full: _____

Student I. D. # _____

Name and Address of Parent(s)/Legal Guardian: _____

Virginia Resident (yes or no) _____

School Address _____

Telephone No. _____ Email: _____

Circle Present Status:

Freshman Sophomore Junior Senior Graduate Student _____

Major Subject: _____ Cum. GPA: _____

College/University where enrolled _____

Projected Graduation Date: (Month & Year) _____

How many hours per semester will you take? _____

Occupational objective after graduation: _____

List Scholarships, prizes and awards received (give dates and amounts, and, use back if necessary)

How do you plan to further finance your college education? Work ___ Loans ___ Family Aid ___

Other Financial assistance received _____

Name & Address of College/University Financial Aid Officer: _____

Please include:

- Three (3) letters of recommendation including one from a professor in applicant's major
- Signed letter from applicant, discussing goals, background, financial need and personal commitment
- Official college transcript
- Include a 1 page list of Extra-Curricular Activities, Community Activities, Honors and Awards

Signature Applicant: _____

Date Submitted _____

Applications must be completed and received by February 1. The applicant's major must be in a field related to garden club interests such as horticulture, forestry, environmental science, botany, landscape design, etc.

Send completed application to:

Jill Quinley, VFGC Scholarship Chairman

PO Box 453,

Madison, VA 22727- 0453, Also: jquinley37@gmail.com