



APPLICATION

Instructions

- Complete the application form. All pages should be filled out entirely.
- Attach at least **two typed or printed letters of recommendation**. One letter must be from an instructor in your field.
Other letter(s) may be from any of the following: recent employer, club advisor, church leader, or any other qualified person, excluding a family member.
- Attach **college transcripts in a sealed envelope**. You must submit a transcript which includes your most recent semester.
- Return completed application and required supporting documentation to:
Scholarship Committee
Bexar County Master Gardeners, Inc.
3355 Cherry Ridge Drive, Suite 208
San Antonio, TX 78230-4818
- **DEADLINE FOR SUBMISSION OF APPLICATIONS IS JUNE 30, 2010**

Personal Data

Name: _____

Current Address: _____

State: _____ Zip: _____ Phone: _____

Permanent Address: _____

State: _____ Zip: _____ Phone: _____

Email: _____

Have you been a member of 4H or FFA at any time? ___ Yes ___ No If yes, describe your involvement.

Do you personally know a member of the Bexar County Master Gardeners or Texas Master Gardeners?

___ Yes ___ No if yes, include name here: _____

If asked to give a horticulture or related presentation to the Bexar County Master Gardeners, would you accept? ___ Yes ___ No. If yes, please briefly describe the nature of your presentation.

Would you apply for or accept an internship with the Texas AgriLife Extension Service? Yes___ No ___
During the school year or during the summer? _____

Educational Background

Name of school now attending: _____

_____ Two Year College _____ Four Year College

_____ Graduate School _____ Five Year Program

Name of school planning to attend in the fall: _____

Transfer students: Have you been formally accepted to this school? _____

(If so, please include a copy of your acceptance letter)

Major: _____ Proposed major or formally declared? _____

Minor or area of specialization: _____

Year currently in school: ___ Sophomore ___ Junior ___ Senior ___ Fifth Year ___ Graduate student

How many years in college: _____ Expected date of graduation: _____

Total number of college hours completed: _____

Number of hours currently carrying: _____

Overall Grade Point Average: _____ Grade Point Average in major: _____

Please list all colleges attended:

School	Dates Attended	Degree	GPA
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Activities/Interests:

Please list any civic awards, honors, scholarships, or involvement in community service. You may also attach photographs of any horticultural or landscape project you have completed or designed.

Statement of Goals:

Please state in 500 words or less your occupational goals. Include any background in horticultural related areas you feel is relevant.

Signature: _____ Date: _____

*Extension programs serve people of all ages regardless of socioeconomic level, race, color, sex, religion, disability, or national origin.
The Texas A&M University System, U.S. Department of Agriculture, and the County Commissioners Courts of Texas Cooperating.*