

# KENT COUNTY MASTER GARDENERS

## 2020 KENT MASTER GARDENERS PLANT & SOIL SCIENCE, HORTICULTURE SCHOLARSHIP APPLICATION

Full Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_

E-Mail Address \_\_\_\_\_ Phone Number \_\_\_\_\_

SSN or University ID # (for payment) \_\_\_\_\_

Length of time at this address \_\_\_\_\_ previous address (if less than two years):

\_\_\_\_\_

Father's Name and Occupation \_\_\_\_\_

Mother's Name and Occupation \_\_\_\_\_

Name of High School/College/University/ and graduation year - - - - -

GPA (current year) \_\_\_\_\_ last year \_\_\_\_\_ Enclose transcripts (must be official)

Name of college or university you plan to attend, or are attending, if possible, please  
attach a copy of your acceptance \_\_\_\_\_

College/University enrollment date \_\_\_\_\_ Major/Minor \_\_\_\_\_

On a separate sheet(s):

\* List extra- curricular clubs and activities

\* Awards and Honors received

\* Hobbies and special interest

\_\_\_\_\_ Did you attach two letters of recommendation from non-family members?

\_\_\_\_\_ Did you attach a 100 +/- word statement of your education and career goals?

\_\_\_\_\_ Did you attach the activities, awards and interest information for current year?

I hereby certify that all the information on the application is true and correct.

\_\_\_\_\_

Signature

\_\_\_\_\_

Date

Cooperative Extension Education in Agriculture and Home Economics, University of Delaware, Delaware State University and the United States Department of Agriculture cooperating. Distributed in furtherance of Acts of Congress of May 8 and June 30, 1914. It is the policy of the Delaware Extension System that no person shall be subject to discrimination on the grounds of race, color, sex, disability, age, or national origin.