

Wolfeboro Garden Club Scholarship Application 2026



Complete this application with your parent's or guardian's assistance and submit it with a copy of your transcript, no later than April 14, 2026 to: wolfeborogardenclubscholarship@gmail.com

- 1.** Name _____
- 2.** Permanent Address: _____

- 3.** Mailing Address (if different than above): _____

- 4.** Email Address: _____
- 5.** Home Phone Number: _____
- 6.** Cell Phone Number: _____
- 7.** Date of Birth: _____
- 8.** High School Attended and Graduation Date: _____
- 9.** Cumulative GPA: _____
- 10.** Name, Location and Anticipated Cost (tuition, room & board) of College/Universities to Which You Have Applied/Anticipate Applying:

11. Anticipated Major: _____

12. Length of Program: _____ Certificate Program _____ 2-Yr. Program _____ 4-Yr. Program: _____

13. Parents' Places of Employment (include addresses):

Father: _____

Mother: _____

14. Annual Household Income: _____

15. Number of Dependents in Household: _____

16. List All High School Activities, Clubs, Honors, Projects, Hobbies or Interests:

17. List All Employers, Dates of Employment and Average Number of Hours Worked per Week During the Summer and School Year:

18. List All Community Organizations, Clubs, or Service Projects in Which You Have Participated:

19. Briefly Tell Us Why You Should be Awarded this Scholarship and Describe Any Family or Personal Circumstances that We Should Know About:

I Believe the Above Information to be Accurate.

Signature of Applicant: _____

Signature of Parent/Guardian: _____

Thank you for applying for the Wolfeboro Garden Club Scholarship. We wish you the Best!

