

**Men's Garden Club of Youngstown Scholarship
Application**

Name _____

Home Address _____ Home phone: _____

City _____ State _____ Zip Code _____

Cell phone _____ Email _____

County of Residence _____ Student College ID# _____

(If currently in college complete information below)

School Address _____ School phone: _____

City _____ State _____ Zip Code _____

Education

List name of school, years enrolled, date graduated, diploma received and other related information for all institutions attended.

High School _____

College _____

Name and address of institution in which you are currently enrolled

Major area of study _____

Years completed and how many remain _____

Advisor _____

Employment

List current and recent employers. If more space is needed, attach additional sheets.

List additional experience that relates to your field of study.

Describe your career goals.

Items to be obtained by applicant and attached to application:

1. Copy of current transcript
2. Three letters of recommendation from 3 professors /or (3 Teachers if in High School) and one from employer preferred if employed.)
3. A typed essay not to exceed one page describing yourself, current and long term professional goals, financial needs and how specifically this scholarship will benefit you.

Return this application by April 7,2021 to:

Men's Garden Club of Youngstown
c/o Robert Schulick
1012 Old Furnace Rd
Youngstown, OH 44511

For Further Information Please Call:

(330) 792 5544 Home

(330) 727 1674 Cell