

PACIFIC REGION OF NATIONAL GARDEN CLUBS, INC.

WASHINGTON, ARIZONA, CALIFORNIA, OREGON, NEVADA, IDAHO, ALASKA, HAWAII

GUIDELINES FOR SCHOLARSHIP APPLICANTS

One \$1,000 scholarship is available for the 2020-2021 academic year. It will be given to full-time students in the junior or senior year of college, or in graduate school pursuing a Master's Degree. Sophomore students may make application for their junior year. No doctoral program students may apply.

1. Applicant must be a legal resident of the state through which he/she applies and must **send the application to the State Garden Club Scholarship Chairman.** Refer to the list of State Scholarship Chairman on page 4.
2. Applicant may attend his or her choice of a U.S. college or university, in or out of state.
3. Applicant must major in Horticulture, Floriculture, Landscape Design, Conservation, Forestry, Botany, Agronomy, Plant Pathology, Environmental Control, City Planning, Land Management, Alternative Energy or related subjects.
4. Applicants must have at least a 3.25 GPA (on a 4.0 point scale) to apply. Complete official academic transcripts (including the Fall 2018 semester) from all colleges and universities attended must be included.
Under graduate students must have at least 12 graded hours of classes per semester.
Graduate students must submit official transcripts for all Graduate and Undergraduate work.
5. All the information requested on the application, including applicant's social security number and the name and address of the college or university financial aid officer who will distribute the scholarship grant for the winner's tuition, books, or other school-related expense must be given.
6. All material must be typed or computer generated. Application Form, Official Transcript/s. Letters of Recommendation, Financial Aid Form, Personal Letter by Applicant and List of Activities must be sent in one packet to the State Garden Club's Scholarship Chairman postmarked by **January 31, 2019.**
7. The scholarship winner will be notified by April 2020.
8. If the scholarship winner changes to a major outside the above-mentioned group or withdraws from school for any reason, or transfers to another college or university, the balance of the scholarship grant fund must be returned to the Pacific Region Treasurer: Becky Hasselbeck, 518 Slater Drive, Fairbanks, AK 99701.
9. Applications will be judged on the following point system:

ACADEMIC RECORD (40% of Total)

Complete official transcript of grades is required. Emphasis is placed on the strength of courses related to student's major in horticulture or allied field.

APPLICANT'S LETTER (25% of Total)

Discussion of background, goals, personal commitment to chosen career and financial need. Applicant's letter is limited to 2 typed or computer-generated pages.

LIST OF HONORS/EXTRA-CURRICULAR ACTIVITIES/WORK EXPERIENCE (10%)

This information should be supplied on a separate sheet of paper and not be listed within the body of applicant's letter.

RECOMMENDATIONS – 3 letters required (5%)

Three letters of recommendation required, considering scholastic ability, character and work-related experiences. (Limited to 1 typed or computer-generated page each.)

FINANCIAL NEED (20%) Signatures of Financial Aid Officer and student are required on Financial Aid form that must be fully completed.

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SCHOLARSHIP APPLICATION

APPLICATION MUST BE TYPED OR COMPUTER-GENERATED Date_____

Name in full _____

Home (legal) address: _____

City_____State_____Zip_____Phone_____

Social Security Number_____Date of Birth_____

Female____Male____Marital status_____# of children_____

School-year Address _____

City_____State_____Zip_____Phone_____

E-mail address_____

College or University in which enrolled_____

Department in which enrolled_____Major_____Minor_____

Present status: Sophomore____Junior____Senior____Fifth year landscape architecture____Graduate____

Current Cumulative Grade Point Average _____

Colleges or Universities previously attended _____

Dates_____Previous GPA _____

When do you expect to graduate?_____Degree

Occupational objective after graduation_____

Name of Financial Aid Officer _____

Address _____

City_____State_____Zip_____Phone_____

Applicants: please send this application:

- Official transcripts (including last semester attended)
- Personal letter which discusses your educational background, career goals, financial need and commitment to your chosen field of study
- Three letters of recommendation covering your scholastic ability, character and work-related experiences
- The Financial Aid Form, signed by you and the Financial Aid Officer
- List of activities/honors
- Please send in **one packet** to your State Scholarship Chairman **postmarked by** January 31, 2019.

Please see page 4 for the list of State Scholarship Chairman

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FINANCIAL AID FORM

The student must complete the section of this form above the **XXXXX**. The Financial Aid Officer of the college or university involved must complete the section below **XXXXX**. **BOTH** individuals must sign the form.

This information will be held strictly confidential. It will be made available only to the appropriate officials of the college or university and to the Pacific Region Scholarship Committee. Since actual financial need is one of the determining factors in the awarding of scholarships, it is necessary that all the requested information be supplied.

Please use the following form to show all anticipated resources, including scholarships (other than from the Pacific Region), loans, grants, etc. as well as anticipated expenses involved in attending college or graduate school in the **2019-2020 school year**. It is not required that total anticipated resources and total anticipated expenses balance.

ANTICIPATED RESOURCES

_____ From parent or spouse
_____ From Friends or Relatives
_____ From personal savings
_____ From School-year Earnings
_____ From Loans
_____ Other Scholarships
_____ Other Grants
_____ Total Anticipated Resources

ANTICIPATED EXPENSES

_____ Tuition and Fees
_____ Housing
_____ Board
_____ Books, Supplies
_____ Clothing, Laundry
_____ Other Financial Obligations
_____ (Specify) _____
_____ Total Anticipated Expenses

THIS WILL AUTHORIZE THE RELEASE OF MY FINANCIAL AID FORM to the Pacific Region of National Garden Clubs, Inc., Scholarship Committee.
Chairman: Kristie Livreri 5608 Great Gorge Court, Las Vegas, NV 89149

Your signature: _____

XXXXX

FINANCIAL AID OFFICER

Is this student eligible for receiving financial aid at your institution?

Grants/Scholarships: Yes _____ No _____ Student Loans: Yes _____ No _____

Has this student applied for financial aid at your institution? Yes _____ No _____

FINANCIAL AID OFFICER'S SIGNATURE _____

PRINTED NAME _____

ADDRESS _____

CITY/STATE/ZIP _____

TELEPHONE NUMBER AND EXTENSION _____ DATE _____

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STATE SCHOLARSHIP CHAIRMAN

Alaska Garden Clubs

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Rev 10/19