South Haven Garden Club College Scholarship Application

Name_____**Date**_____

Permanent Address_____

Phone:_____**Email:**_____

High School:_____**Diploma/GED Date:**_____**GPA:**_____

College/University Attending:_____

Field of Study:_____**Major:**_____

Goal:_____

Extra-curricular Activities/Sports - High School:

Activity/Sport: **Number of Years:**

_____

_____

_____

Awards/Recognitions - High School:

_____

_____

_____

Community Activities/Volunteer:

_____

_____

_____

Work Experience: (begin with most recent)

Employer **Duties** **Dates** **Hours/Week**

_____

_____

_____

Applicant's Signature_____**Date**_____