

Garden Clubs of Idaho, Inc.

Scholarship Application

Application must be typed or computer generated.

Name in full \_\_\_\_\_

Home (legal) address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Female \_\_\_ Male \_\_\_

Date of Birth \_\_\_\_\_ Marital Status \_\_\_\_\_ # of Children \_\_\_\_\_

School 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 \_\_\_ Graduate \_\_\_

Fifth-year Landscape Architecture \_\_\_ 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 \_\_\_\_\_

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

Submit this form with the other required documents (see Guidelines) to the GCII Scholarship Chair, LeeAnn McMaster, 1209 Airway Ave., Lewiston, ID 83501

DEADLINE: MUST BE POSTMARKED BY February 1, 2022

SC-01 (08/09/2021, rev.)