



SOUTHBOROUGH GARDENERS SCHOLARSHIP

TO THE APPRAISER:

You have been asked to provide information in support of the applicant for scholarship.

Please DO NOT mention the student's name in any of your written comments. After completing, please return to the applicant or attach to the completed application and mail to:

Scholarship Chair
Southborough Gardeners
PO Box 184
Southborough, MA 01772

OR email to:

southboroughgardeners@gmail.com

Appraiser's Name: _____

Title: _____

Email: _____

Applicant's Name: _____



APPLICANT APPRAISAL

This appraisal is to be filled out by a high school or college counselor/advisor, instructor, member of the clergy or supervisor.

1. The applicant's achievements reflect his/her abilities:

Extremely Well ____ Very Well ____ Moderately Well ____

2. The applicant's ability to set realistic and attainable goals is:

Excellent ____ Good ____ Fair ____

3. The quality of the applicant's commitment to school is:

Excellent ____ Good ____ Fair ____

4. The quality of the applicant's commitment to his/her community is:

Excellent ____ Good ____ Fair ____

5. I know the applicant:

Extremely Well ____ Very Well ____ Moderately Well ____

6. I would rate the character of this applicant as:

Excellent ____ Good ____ Fair ____

In your opinion, what are the candidate's greatest strengths and assets?

Additional Comments: _____

Appraiser's Signature: _____ Date: _____

Please return to: Southborough Gardeners, PO Box 184, Southborough, MA 01772
OR email to: southboroughgardeners@gmail.com



Application for Southborough Gardeners Scholarship

Qualifications: Student must be a resident of Southborough for at least 2 years and accepted at a school of higher education in one of the following fields: Floral Design, Landscape Design, Horticulture, Environmental Studies, Ecology, Conservation, Agriculture or any other related field.

To be completed by the applicant:

Name: _____

Address: _____

Cell phone: _____ Email: _____

Present School: _____ Graduation Date: _____

- Type of post secondary schools to which you have applied:

4 Year College/University _____ Voc Tec _____ Community College _____

- List post secondary schools to which you have been accepted:

- Student will be enrolled: Full time _____ Part-time _____

- Major Field of Study: _____

Work Experience (past 4 years) - you may attach a resume for the following information:

LOCATION: POSITION: DATES: HOURS/WEEK:

Application continued:

School Activities during the past 4 years (Clubs, Music, Athletics, etc):

<u>ACTIVITY:</u>	<u>YEARS PARTICIPATED:</u>	<u>HONORS/AWARDS:</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Out of school activities during the past 4 years (community service, scouts, etc)

<u>ACTIVITY:</u>	<u>YEARS PARTICIPATED:</u>	<u>HONORS/AWARDS:</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Make a statement of your plans as they relate to your educational and career objectives and future goals:

Any additional information to tell the Committee for the selection process:

*Please include an Official Copy of your High School or Post Secondary School Transcript with your application.

*Applicant Appraisal Form is to be mailed/emailed separately by the selected adult.

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