



## North Andover Garden Club 2020 Memorial Scholarship Application

(please type or clearly print all applicant information)

Full Name \_\_\_\_\_

Address \_\_\_\_\_

Date of Birth \_\_\_\_\_

Phone Number and Email Address \_\_\_\_\_

Name of parent/guardian \_\_\_\_\_

Parent/guardian address \_\_\_\_\_

Parent/guardian phone number \_\_\_\_\_

### **SCHOOL INFORMATION**

High School Attended \_\_\_\_\_

Graduation month/year \_\_\_\_\_

High School Address \_\_\_\_\_

Post-Secondary School for which scholarship is  
requested \_\_\_\_\_

School Address \_\_\_\_\_

Intended Field of Study \_\_\_\_\_

Type of School: 4 year \_\_\_ 2 year \_\_\_ voc/tech \_\_\_ Other (explain) \_\_\_\_\_

Anticipated date of graduation from post-secondary program \_\_\_\_\_

**Required with the North Andover Garden Club Application:**

1. A brief essay discussing your background, aspirations and career plans and how those plans may relate to any one part of the North Andover Garden Club's mission to advance the science of horticulture, the conservation of natural resources and the development of civic beauty.
2. A list of activities, special honors and/or leadership, employment positions and/or volunteer experiences during the past few years that you feel made a significant contribution to the North Andover community.
3. Two letters of recommendation that disclose your personal character, scholastic ability and/or work /volunteer related experience.

Only those applications that have been received by the Scholarship Committee by April 15, 2020 will be considered. The winner will be notified on or before May 20, 2020.

Thank you for applying and best of luck with your continuing education.

North Andover Garden Club  
Attn: Scholarship Committee  
PO Box 392  
North Andover, MA 01845

Questions may be addressed by calling 978-502-8311.