PIONEER DISTRICT GARDEN CLUBS, INC

SCHOLARSHIP APPLICATION

Application may be hand printed, typed, or computer-generated.
(Reverse side may be used.)

Name in Full_____

Home (legal) address_____

City_____County_____State_____Zip_____

Telephone_____Cell_____

Social Security Number _____Date of Birth_____

Female___Male___Marital status_____#of Children_____

School-year Address_____

City_____State____Zip_____Telephone_____

Cell_____Email_____

High school, College or University in which enrolled_____

Department in which enrolled_____

Major_____Minor_____

Present Status:
Community College:_____College/University_____

Current Cumulative Grade Point Average_____

College or Universities previously attended_____

Dates_____Previous GPA_____

When do you expect to graduate?_____Degree_____

Occupational objective after graduation_____

Name off Financial Aid Officer_____

Address_____

City_____State____Zip_____Telephone_____