Student Information

Name							
	Last	First		Middle		Date of Birth	
Address _							
	Street						
	City	State			Zip c		
Phone			E-mail _			MARKALL WILLIAM AND	
Parent's na	me						
Parent's ad	dress						
Name of current school							
College you plan to attend							
Career plan	s						

Scholarship applicant must be a high school senior who will graduate in the year the scholarship is received. Student must have at least a B grade average (3.0 on a 4.0 scale).

Career plans must be related to an area within the objectives of Red Bluff Garden Club Inc., which are plant or horticulture oriented fields such as: botany, conservation, natural resources, plant aspects of agriculture, entomology, floriculture, forestry, soil science, crop science, urban planning, natural resources, or related fields.

Please include the following information with this application form:

- 1. Transcript of current high school
- 2. Student statement of candidacy (why we should consider you. Discuss education, career goals, high school activities, employment, activities outside of school)
- 3. Two formal letters of recommendation from teacher or counselor. Matrix is included in packet
- 4. Financial Aid Form (make your best estimate)
- 5. Picture of applicant with name on back (will want picture for publicity)

Submitting the application: Staple pages in upper left hand corner. Submit only application pages. Do not place in a folder.

Financial Aid Form

This form must be completed and signed by student.

This form will be held in strictest confidence. It will be made available only to the Red Bluff Garden Club, Inc. scholarship committee. Since financial need is one of the determining factors in awarding scholarships, it is necessary that the requested information be supplied.

Use the following to show all anticipated sources of funds including other scholarships if known, assistantships, educational insurance policies, etc. as well as all costs involved for attending college in the coming school year.

Resources	Expenditures		
From parent or relative	Tuition		
From personal savings	Housing		
Summer earnings	Board		
School-year earnings	Books/supplies		
Grants/Scholarships	Clothing/Laundry		
Loans	Transportation		
Other	Other		
Total available funds	Total expenses		
Student signature	Date		

Letters of Recommendation

Student's Name:						
To the student: This form i students cannot be accept		ed by current or	past instructors.	Letters from frie	ends, relatives, or o	other
To the evaluator: Please co	omplete this for	m. Please attach	a formal letter	of recommenda	tion.	
This form will become part considered non-confidenti		available to the s	tudent. Therefo	ore, the reference	e included in the fil	e will be
Please rate the student in e	each of the follo	wing categories:				
Categories	Superior	Above Average	Average	Below Average	No Basis For Judgment	
Academic Achievement						
Self-discipline						
Strength of character						
Written/Oral Expression						
Creativity	- comme					
Overall evaluation						
Evaluator's Name (print) _						
Evaluator's Signature				Date		
Place of employment			Title or pos	ition/dept		

Please attach formal letter of recommendation with this page.

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Student's Name:						-
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Self-discipline						
Strength of character						
Written/Oral Expression						
Creativity						
Overall evaluation						
Evaluator's Name (print) _			···			
valuator's Signature Date						
Place of employmentTitle or position/dept						

Please attach formal letter of recommendation with this page.