

GREEN COUNTY FORESTRY EDUCATION CENTER

SCHOLARSHIP APPLICATION

NAME:

AGE:

ADDRESS:

PHONE:

NAME OF HIGH SCHOOL:

YEAR OF GRADUATION:

HIGH SCHOOL EXTRACURRICULAR ACTIVITIES; AWARDS; HONORS:

NAME OF COLLEGE OR UNIVERSITY OR TECHNICAL SCHOOL YOU ARE
ATTENDING OR PLAN TO ATTEND:

IF CURRENTLY ATTENDING A UNIVERSITY, ETC., LIST ANY EXTRA-
CURRICULAR ACTIVITIES YOU ARE INVOLVED IN:

PLEASE PROVIDE A BRIEF NARRATIVE CONTAINING YOUR CAREER
OBJECTIVE, HOBBIES, JOB HISTORY, OR ANY OTHER PERTINENT
INFORMATION. USE THE BACK OF THIS APPLICATION IF NECESSARY: