

# SALEM GARDEN CLUB SCHOLARSHIP APPLICATION

Information must be completed and received no later than **April 30, 2010**

Please mail to:

Joyce Wallace, Scholarship Committee  
172 Federal Street, Salem, MA 01970

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Last

First

Middle

Permanent Address: \_\_\_\_\_

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

Home Phone #: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Name of high school attending/attended: \_\_\_\_\_

High school counselor: \_\_\_\_\_ HS phone #: \_\_\_\_\_

Name of College/University you plan to attend or are currently enrolled:

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College

City/State

College Major Declared or Planned: \_\_\_\_\_

Please list all of your volunteer or work experience in your Career Choice of Study (include dates, name of organization and a one sentence description of your experience):

In one paragraph, please describe why you have chosen your Career Choice of Study (feel free to continue on another sheet of paper):