

**Submit Applications To:**

WSNLA Scholarship & Research Charitable Fun  
 34400 Pacific Hwy. S. Ste 2, Federal Way, WA 98003  
 800.672.7711 Fax: 253.661.6058 info@wsnla.org

**Our Mission:** To support the success of our members by serving, promoting, representing and educating the horticultural community of Washington State.



**WSNLA**  
 SCHOLARSHIP & RESEARCH  
 CHARITABLE FUND APPLICATION

**SELECTION CRITERIA:**

The following selection criteria shall be utilized when reviewing applications and selecting recipients.

- Must submit a completed application, statement of intent and at least two letters of reference, by February 28.
- Must be pursuing a major in the horticultural industry.
- Must plan to or be attending a Northwest accredited educational institution.
- Must demonstrate academic success.

**TYPE OR PRINT CLEARLY IN BLACK INK.****1. PERSONAL INFORMATION**

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

Current Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Home Address, if different: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Cell Number: \_\_\_\_\_

**2. EDUCATIONAL BACKGROUND**

College or University: \_\_\_\_\_

Major (including, Minor) and/or degree goal: \_\_\_\_\_

Anticipated Graduation Date: \_\_\_\_\_ GPA: \_\_\_\_\_

High School Name & Location: \_\_\_\_\_

**3. EMPLOYMENT HISTORY**

Please list past employment, including employer's address and phone number and your job activity in ornamental horticulture or fruit tree production field. \_\_\_\_\_

**4. SPECIAL ACHIEVEMENTS/HONORS AND RECOGNITION**

Horticultural activities and other achievements: \_\_\_\_\_

**5. FINANCIAL SUPPORT**

Please tell us the percentages of support you are receiving from sources below:

Self: \_\_\_\_\_ Parents: \_\_\_\_\_ Other scholarships or grants: \_\_\_\_\_ Other (explain): \_\_\_\_\_

**6. STATEMENT OF INTENT**

Include an individual statement describing educational experience and goals (e.g. special projects), career plans, leadership experience, and community involvement. (This statement should be no longer than one typed page, double-spaced.)

**7. LETTERS OF REFERENCE**

Include at least two letters of reference from individuals who can attest to your ornamental horticulture knowledge or fruit tree production abilities or interest. Please include name, address and phone number. (e.g. professor, employer, etc.)

**8. LOCAL NEWSPAPER:** \_\_\_\_\_

Please sign below and return this application with all required correspondence to:

**WSNLA Scholarship & Research Charitable Fund by February 28.**

I certify that all information of this form is true to the best of my knowledge. I understand that all decisions made are final and not subject review or appeal. I further understand that any information provided in this form may be shared with committee members of the sponsor scholarship.

Student Signature

(Parent Signature if student is under 18)

Date