

**SCHOLARSHIP APPLICATION COVER**  
**Friends of Garrett Golf**

**I certify that all information given in every part of this application is true. I understand that falsification of information may result in termination of any scholarship granted.**

**I grant permission for Garrett High School Guidance Office to release a copy of my transcript to the individual or group responsible for awarding or administering this scholarship.**

\_\_\_\_\_  
**Student Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Parent/Guardian Signature**

\_\_\_\_\_  
**Date**

# **Friends of Garrett High School Golf Scholarship**

This award has been established to provide financial assistance to a graduating senior who plans to pursue a post-secondary education, and who played interscholastic golf for Garrett High School. The \$500 scholarship will be announced at the Senior Awards Program, and will be paid to an educational institution of the recipient's choice for tuition or other fees.

The selection of this year's recipient will be made by Pat Kinsey and family, who are underwriting the scholarship. Other contributors to the fund and the selection process will be welcomed going forward. The award will be based on the following criteria:

- Character and Integrity (as reflected in two required letters of recommendation)
- Letter of Intent – Why do you deserve the scholarship (500 words or less)
- High School Grades
- Years of Golf Team Participation
- Other Extra-curricular Activities

***It is understood that the recipient will refund the scholarship if he/she does not complete the first semester/quarter at the enrolled institution.***

***Years Played on Golf Team: 9 10 11 12***

**GARRETT SCHOLARSHIP**

NAME \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_

HOME PHONE \_\_\_\_\_ DIPLOMA TYPE \_\_\_\_\_

FATHER'S NAME \_\_\_\_\_

Occupation/Employer \_\_\_\_\_

MOTHER'S NAME \_\_\_\_\_

Occupation/Employer \_\_\_\_\_

Check if applicable:  Father deceased  Mother deceased  Parents divorced

Ages of other children in your family \_\_\_\_\_ Number of family members in college \_\_\_\_\_

School you are planning to attend \_\_\_\_\_

City / State of School \_\_\_\_\_  Full-time student  Part-time student

Intended Major \_\_\_\_\_  Accepted  Applied-awaiting decision

Career Goal \_\_\_\_\_

Living arrangements:  On-campus  Off-campus (independently)  Off-campus (with family)

**School or Community Activities** in which you have participated or positions held in High School

Please include any workshops attended (may attach separate page):

<u>Activity</u>	<u># of Years</u>	<u>Leadership Positions, Awards, Recognition</u>
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_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Work Experience:

\_\_\_\_\_

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Why applicant desires scholarship and how it will be used:

I understand that if awarded this scholarship, it may be sent directly to the college, university or technical college I am attending upon showing proof of enrollment.

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Signature of Applicant