Nebraska Nursery & Landscape Association

All rules and guidelines for the scholarship application including:
Deadline, general information, college information, required background information in the form of paragraphs or essays and reference information.

Scholarship Packet

521 First Street, PO Box 10 – Milford, NE 68405
(402) 761-2216   FAX: (402) 761-2216   E-mail: jennifer@youraam.com
NEBRASKA NURSERY AND LANDSCAPE ASSOCIATION

SCHOLARSHIP APPLICATION FOR $1000 towards TUITION & BOOKS

Scholarship funds are available to students enrolled in a horticulture program at a University or college located within the state of Nebraska. To be awarded in January

(Please print legibly.)

DEADLINE IS DECEMBER 10th

General Information:
Name:___________________________________________________________
Complete Home Address:____________________________________________
________________________________________________________________
Home Phone Number:______________________________________________

College Information:
Complete College Address:__________________________________________
________________________________________________________________
College Phone Number:_____________________________________________
E-mail address:____________________________________________________
College Enrolled In:________________________________________________
GPA:_____________________
Graduation Date:_________________________
Number of Semesters in Horticulture Program:________________________

On a separate sheet(s) of paper, please compose a short essay to include:
• Personal background
• Leadership skills & scholastic achievements
• Why this scholarship is important to your immediate future and if you have any particular hardship.
• What are your interests in horticultural and why
• What are your goals in the industry
• How do you feel about the Horticulture Industry now and in the future.

Please keep your answers concise and on topic. Your remarks and presentation weigh heavily in the judges scoring.

Don’t forget to complete the attached reference forms.

Signature:_______________________________________Date:_________________

Mail to:
NNLA, Scholarship Committee, 521 First Street, PO Box 10, Milford, NE 68405
Instructions for Reference Forms

Two reference forms are included with this application. Please select references that know your character and/or your potential in the field of horticulture. One should be an employer or former employer. Do not list a faculty member from the Horticulture Department unless they have employed you.

1. Remove the two reference forms from this application.

2. Legibly print the name of your references and your name in the appropriate spaces.

3. Mail the form to your references along with a stamped envelope addressed to: Scholarship Committee, Nebraska Nursery & Landscape Association, 521 First Street, PO Box 10, Milford, NE 68405.

4. Complete the portion below and return it with your application to the NNLA.

Personal References

The people I have sent my reference letters to be completed and returned to the Scholarship Committee, NNLA are as listed:

First Reference
Name:___________________________________________________________
Phone Number:____________________________________________________

Second Reference
Name:___________________________________________________________
Phone Number:____________________________________________________
Nebraska Nursery & Landscape Association

Scholarship REFERENCE Form

Student Name: ____________________________________________________________
(to be filled in by student before sending to reference)

To: __________________________________________ (reference)

I am applying for a scholarship to be awarded by the Nebraska Nursery & Landscape Association. I hope you will serve as a reference to help the Scholarship Committee assess my qualifications. Please complete the bottom half of this form. If you would like to give them further information, please comment on the back of this sheet or enclose a separate letter. Enclosed is a stamped, addressed envelope for your use in returning this form to the Nebraska Nursery & Landscape Association. The Deadline for the application and references is December 10. Please return to: Nebraska Nursery & Landscape Association, Scholarship Committee, 521 First Street, PO Box 10, Milford, NE 68405.

__________________________________________________________________________
(Student Name)

__________________________________________________________________________
(Student Address)

__________________________________________________________________________
(Student City, State, Zip)

Please rate the applicant by checking the most appropriate space for each of the qualities listed.

<table>
<thead>
<tr>
<th>Potential for Career Success</th>
<th>Dependability</th>
<th>Integrity &amp; Honesty</th>
<th>Scholarship &amp; Intellectual Ability</th>
<th>Compatibility</th>
<th>Drive &amp; Initiative</th>
</tr>
</thead>
<tbody>
<tr>
<td>Superior</td>
<td>Above Average</td>
<td>Below Average</td>
<td>Poor</td>
<td>Not Observed</td>
<td></td>
</tr>
</tbody>
</table>

Please attach further comments.
Nebraska Nursery & Landscape Association

Scholarship REFERENCE Form

Student Name: __________________________________________________________
(to be filled in by student before sending to reference)

To: __________________________________________________ (reference)

I am applying for a scholarship to be awarded by the Nebraska Nursery & Landscape Association. I hope you will serve as a reference to help the Scholarship Committee assess my qualifications. Please complete the bottom half of this form. If you would like to give them further information, please comment on the back of this sheet or enclose a separate letter. Enclosed is a stamped, addressed envelope for your use in returning this form to the Nebraska Nursery & Landscape Association. The Deadline for the application and references is December 10. Please return to: Nebraska Nursery & Landscape Association, Scholarship Committee, 521 First Street, PO Box 10, Milford, NE 68405.

_____________________________________________________________
(Student Name)

_____________________________________________________________
(Student Address)

_____________________________________________________________
(Student City, State, Zip)

Please rate the applicant by checking the most appropriate space for each of the qualities listed.

<table>
<thead>
<tr>
<th>Potential for Career Success</th>
<th>Above Superior</th>
<th>Below Average</th>
<th>Not Below Average</th>
<th>Poor</th>
<th>Not Observed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dependability</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Integrity &amp; Honesty</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Scholarship &amp; Intellectual Ability</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Compatibility</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Drive &amp; Initiative</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Please attach further comments.
MEMBERSHIP – Student Applicant
Annual Dues       Membership Year: July 1st – June 30th

Full Time Student Members......................................................... $0

Please (print or type)
Name__________________________________Firm Name___________________________________
Address__________________________________________________________________________
City________________________________State__________________Zip________________________
Email Address_____________________________________________________________________
Phone Number__________________________Fax Number_________________________________
Web Site______________________________________________________________

___ I do not want the above information posted on the NNLA website.