

Lake Granbury Master Gardeners Scholarship Application

Deadline – Completed application must be in the LGMG/Hood County Extension office by **Friday, March 6, 2026**. Call the office at 817-579-3280 if you have questions.

Important - Be sure to enclose your most recent transcript and all letters of recommendation with **this** application.

Mail to:

Lake Granbury Master Gardeners Scholarship /
Hood County Extension office
1410 W. Pearl St., Room #22
Granbury, TX 76048

Information must be typed or printed legibly on this form. Use additional paper if needed to complete answers to any section below.

Personal Data

1. Name _____ Age____ U.S. Citizen ___Yes___No
2. Current Address _____
3. City _____ TX Zip _____
4. E-mail address _____
5. Telephone _____
6. Are any of your relatives involved in horticulture, agriculture or a closely related field? ____Yes ____No

Education

6. Name of school now attending _____
7. Name of school planning to attend next semester _____
8. Intended major _____
9. Intended minor or area of specialization _____
10. Overall grade point average _____

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11. Please list any awards, honors, scholarships you have received or offices held.

12. Please list any school or community activities, including volunteer work, in which you are involved.

Work Experience

13. List all your work experiences.

Employer	Job Titles or Duties	Dates
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Personal References

14. Please submit three letters of recommendation with this application from people who have known you for the past two years, such as a teacher, counselor, club advisor, church advisor, employer or any other person qualified to attest to your abilities, character and scholastic ability. Two letters must be from non-family members.

Educational and Occupational Goals

15. In 300 to 500 words, clearly and concisely state
- the reason you are applying for this scholarship,
 - why it would benefit you, and
 - your career objectives as they relate to horticulture or agriculture.

Certification of Application Information

I certify that the information contained in this application is true and complete to the best of my knowledge. I realize that this application may not be processed if it is not complete and submitted with **ALL** required information. I hereby give Lake Granbury Master Gardeners Scholarship Committee permission to use the information provided on this application for review and public recognition. This application and related materials become the property of Lake Granbury Master Gardeners.

Applicant's Signature

Date