



JOHN P. WHITE MEMORIAL SCHOLARSHIP FUND APPLICATION FORM



Students must return all of the following items listed below to the John P. White Memorial Scholarship Committee by the required deadline of **June 15th for the fall term** and **November 15th for the spring term**. Recipients will be notified of selection by July 31st for the fall term and January 1st for the spring term.

- Completed and signed scholarship application
- Two letters of recommendation (*reference Item #2 under Requirements Section*)
- Biographical Essay (*reference Item #3 under Requirements Section*)

****All applicants must use this application form. No other format will be accepted.****

STUDENT INFORMATION:

Name: _____

Class status for the upcoming semester (junior, senior, etc.): _____

College or educational institution you attend or plan on attending: _____

Chosen major: _____ Expected date of graduation: _____

CONTACT INFORMATION:

Please indicate which of the following addresses you wish to be notified of award selections.

Campus/School Address:

Phone: _____ E-mail: _____

Home Address (if different than above):

Phone: _____ E-mail: _____

SCHOLASTIC ACHIEVEMENT (use extra page if necessary):

Please list only the most recent achievements, starting from the most recent.

Honor or Award	Basis for Selection
1.	
2.	
3.	

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Extracurricular Activities, Clubs, Volunteer Activities, Etc.	Positions Held and Time Frame/Year
1.	
2.	
3.	

Relevant Course or Work Experience	Time Frame/Year
1.	
2.	
3.	

I certify that all parts of the application and required attachments are correct and true. I understand that if any part of the provided information is found to be false at any time, it may result in disqualification from or revocation of award. I also understand that if I am awarded a scholarship as a result of this application, my name will be published and announced at the discretion of the John P. White Memorial Scholarship Committee which is composed of representatives from the Florida Chapter ISA and Florida Urban Forestry Council.

Signature _____

Date _____

Return completed application and attachments to:

John P. White Memorial Scholarship Committee
c/o Florida Chapter ISA
7853 South Leewynn Court
Sarasota, FL 34240-9634