



# Ohio Chapter International Society of Arboriculture

## 2025 Scholarship Program

### Application Deadline January 1, 2025

The purpose of the Ohio Chapter ISA Scholarship Program is to promote professional arboriculture within the state of Ohio. The goal is to assist individuals with the financial responsibility of professional arboricultural development through higher education in the field or via a professional industry organization such as the International Society of Arboriculture. In 2025, the Chapter will award up to three (3) Traditional Student and five (5) Professional Development scholarships.

## Professional Development

Up to \$500 credit/reimbursement for expenses related to obtaining professional development in arboriculture. Applicants are judged on their ability to meet the eligibility requirements for the certification or credential.

### Eligibility Requirements

1. Applicants must be eligible and preparing to take an ISA certification exam or qualification, or other industry qualification or credential (i.e. CTSP, TPAQ, etc.) no later than September 1 after receiving the award.
2. Applicants must be members of both the ISA and the Ohio Chapter.
3. Expenses may include:
  - ISA study guide or materials specific to the certification or qualification
  - Exam or qualification course fee
  - Ohio Chapter review or preparation course fee
 Recipients must submit all receipts for reimbursement to the Ohio Chapter ISA no later than September 1, 2025.
2. Applicants must submit 2 letters of recommendation from arboriculture/horticulture professionals; at least 1 of these must include a letter of recommendation from an ISA Certified Arborist professional.
3. Recipient must volunteer and actively serve for at least one year on an Ohio Chapter committee.

## Traditional Student

\$1,000 will be disbursed to the academic institution where the recipient is enrolled. The recipients will receive 12-months complimentary membership to the Ohio Chapter ISA and the International Society of Arboriculture.

### Eligibility Requirements

1. Applicants must be Ohio residents and enrolled as second-year students in an accredited two-year post-secondary program OR third or fourth-year students enrolled in an accredited four-year post-secondary green-industry program such as arboriculture, horticulture, or urban forestry.
2. Applicants must submit three letters of recommendation including one from an academic advisor, one from a current or previous professor, and one from another instructor or industry professional.
3. Applicants must submit a personal statement on why they are a good candidate for the scholarship.
4. Applicants must maintain a minimum 2.5 GPA.

## Application Instructions

### Review Process

- Applications lacking **ALL** eligibility requirements will not be accepted.
- Submission of all required documentation is the responsibility of the applicant.
- Applicants who have not previously been awarded a Chapter scholarship will receive priority consideration over previous recipients.

**The application deadline is January 1.**

**All applicants will be notified via email Before February 1.**

Recipients will be announced in the Ohio Chapter's publication, *The Buckeye Arborist*.

**Submit the completed application and documentation to [info@OhioChapterISA.org](mailto:info@OhioChapterISA.org) or mail to Ohio Chapter ISA, PO Box 267, Baltimore, OH 43105-9998.**





**Ohio Chapter International Society of Arboriculture  
Traditional Student Scholarship Application**

Application Deadline January 1, 2025

Please Print or Type Information

Full Name \_\_\_\_\_ Preferred First Name \_\_\_\_\_

E-mail Address \_\_\_\_\_ Phone Number \_\_\_\_\_

**Educational Enrollment**

I am a (check one):  Full-Time Student  Part-Time Student

College/University \_\_\_\_\_ Student ID# \_\_\_\_\_

Mailing Address of Bursar's Office \_\_\_\_\_

Type of Degree \_\_\_\_\_ Major \_\_\_\_\_

Date of Enrollment \_\_\_\_\_ Anticipated Graduation Date \_\_\_\_\_  
(Month/Year) To (Month/Year)

**Practical Experience**

Current or Most Recent Employer/Company \_\_\_\_\_ Position \_\_\_\_\_

Supervisor \_\_\_\_\_ Title \_\_\_\_\_

Date of Employment \_\_\_\_\_  
(Month/Year) To (Month/Year)

Job duties related to arboriculture:

**Essay Questions**

Please attach a separate sheet with your responses to the following three questions:

1. Why are you pursuing a career in horticulture/arboriculture?
2. Why do you feel that you are a good candidate for this scholarship?
3. Describe your dream job after graduation.

**Application Checklist**

I have included:

- Completed Application
- Proof of Enrollment
- Essay Responses
- 3 Letters of Recommendation
  - o One from academic advisor (Enter First & Last Name): \_\_\_\_\_
  - o One from current or previous professor – please list name: \_\_\_\_\_
  - o One from other instructor or industry professional – please list name: \_\_\_\_\_

**Signature/Approval of Information**

I have completed the application honestly and to the best of my abilities.

\_\_\_\_\_  
Applicant Signature Date

Submit Completed Application and Documentation to:  
[info@OhioChapterISA.org](mailto:info@OhioChapterISA.org) or Ohio Chapter ISA, PO Box 267, Baltimore, OH 43105



# Ohio Chapter International Society of Arboriculture Professional Development Scholarship Application

Application Deadline January 1, 2025

Please Print or Type Information

Full Name \_\_\_\_\_ Preferred First Name \_\_\_\_\_

E-mail Address \_\_\_\_\_ Phone Number \_\_\_\_\_

My current Certification(s) / Qualification(s)

- ISA Certified Arborist (Certification # \_\_\_\_\_)
- Qualifications: \_\_\_\_\_
- My ISA dues are paid thru \_\_\_\_\_, and my Ohio Chapter dues are paid thru \_\_\_\_\_.  
(month/year) (month/year)
- I am pursuing (check one):
  - ISA Certification: \_\_\_\_\_
  - Tree Risk Assessment Qualification/TRAQ
  - TRAQ Renewal
  - Tree & Plant Appraisal Qualification/TPAQ
  - Certified Treecare Safety Professional/CTSP
  - ASCA Registered Consulting Arborist
  - Other \_\_\_\_\_

## Practical Experience

**Current** or Most Recent Employer/Company \_\_\_\_\_

Your Position \_\_\_\_\_

Supervisor \_\_\_\_\_ Title \_\_\_\_\_

Dates of Employment \_\_\_\_\_  
(Month/Year) To (Month/Year)

Job duties related to arboriculture:

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**Please enter information from your previous employer if you have less than three years with your current employer.**

Employer/Company \_\_\_\_\_ Position \_\_\_\_\_

Dates of Employment \_\_\_\_\_  
(Month/Year) To (Month/Year)

Job duties related to arboriculture:

Submit Completed Application and Documentation to:

*info@OhioChapterISA.org* or Ohio Chapter ISA, PO Box 267, Baltimore, OH 43105

**Essay Questions**

*You may attach a separate sheet if you require more space.*

1. What certification or qualification are you pursuing and why?

2. How will this new credential assist you in furthering your career?

3. Why do you feel that you are a good candidate for this credential and scholarship?

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**Application Checklist**

- Completed Application
- Two Professional Letters of Recommendation (At least one must be from an ISA Certified Arborist.)
  - Please list the first and last names of those individuals who submitted letters.  
Check the box if the individual is an ISA Certified Arborist.
  - 1. \_\_\_\_\_  ISA Certified Arborist
  - 2. \_\_\_\_\_  ISA Certified Arborist

**Signature/Approval of Information**

- I certify that I have read, and meet the requirements, for the certification/qualification.
- I understand that I must register for the certification/qualification before September 1, 2025.
- I have completed the application to the best of my abilities.

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Applicant Signature

Date