



Ohio Chapter International Society of Arboriculture Traditional Student Scholarship Application

Application Deadline January 15

Please Print or Type Information

Full Name _____ Preferred First Name _____

E-mail Address _____ Phone Number _____

Educational Enrollment

College/University _____ Student ID# _____

Bursar's Office Mailing Address _____

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-May be an Unofficial Transcript
- ☐ 3 Essay Responses
- ☐ 3 Letters of Recommendation
 - o Academic advisor (enter their First & Last Name): _____
 - o Current or previous professor (enter their First & Last Name): _____
 - o Other instructors or industry professionals (enter their First & Last Name): _____

Signature/Approval of Information

I have completed the application honestly and to the best of my abilities and certify that I am a student.

Applicant Signature

Date