

# PAPSS Scholarship Application

**Pennsylvania Association of Professional Soil Scientists**

PO Box 871, Mechanicsburg, PA 17055

## Scholarship Application

*Please print this application and mail to the Scholarship Committee at the address above.*

1. Name: \_\_\_\_\_  
Signature \_\_\_\_\_

2. Home Address: \_\_\_\_\_  
Home phone: \_\_\_\_\_

3. Current Address: \_\_\_\_\_  
Current phone: \_\_\_\_\_

4. Date of Birth: \_\_\_\_\_

5. Name of Parent or Guardian: \_\_\_\_\_

6. School at which scholarship funds will be applied if awarded:

\_\_\_\_\_

7. Do you presently hold other scholarships? Yes \_\_\_\_\_ No \_\_\_\_\_  
Source and amount of other scholarships: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**8. On a blank page please write** a one page typed letter stating your background, interest in soil science, objectives of your educational pursuits, career plans, financial needs, leadership positions, and why you believe you deserve this scholarship.

9. Names, addresses and phone numbers of three references, including most recent employer:

Reference Name	Address	Phone
_____	_____	_____
_____	_____	_____
_____	_____	_____

10. Name of college advisor: \_\_\_\_\_

11. Grade level in school this year: \_\_\_\_\_

12. Major course of study:\_\_\_\_\_

13. List the courses completed or in process, which provide background in soil science and natural sciences or environmental science (attach a copy of latest college transcript or high school report if incoming freshman):

14. What percentage of funds for college this year will come from:

Parents\_\_\_\_\_ Student income:\_\_\_\_\_

Loans\_\_\_\_\_ Grants\_\_\_\_\_ Other\_\_\_\_\_

15. Parents occupation:\_\_\_\_\_

Number of parents dependants:\_\_\_\_\_

Number of dependants currently in college:\_\_\_\_\_

Are you a dependant?\_\_\_\_\_

16. List source and amount of income earned by student during past school year

<u>Source(s)</u>	<u>Amount</u>
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17. Comments to support any of the questions concerning financial status: