

Minnesota Golf Course Superintendents Association Legacy Scholarship Application

Information for Applicants

1. Type all parts of this application. Please only print on 1 side of paper and do not staple pages together!
2. Limit answers to essay questions to 100 words or less.
3. The student must complete a short (100 words) essay on his/her parent or grandparent's involvement with MGCSA. The essay must be original and not previously submitted to MGCSA.
4. If additional space is needed, type your response on standard (8 ½" x 11") white paper. Clearly identify what portion of the form your additional pages relate to.
5. Your academic advisor or head of the department at the school that you currently attend should complete the Advisors report. The form should be mailed to the MGCSA Scholarship Committee directly by your advisor or forwarded with your application in a sealed envelope.
6. One of your parents or legal guardians must be an active member of MGCSA. Please specify which member classification they are (i.e. Class A or B, Affiliate).
7. The student must be enrolled or accepted at a university, college, junior college or technical school for the next academic year (verification required).

Eligibility:

1. Three awards will be given to children and grandchildren of Class AA, A, B and C members. One award of \$1,500 in the name of Joseph S. Garske will be given to the highest evaluated applicant. That award will be renewable for one year contingent upon full-time enrollment and satisfactory academic performance. Two other \$1,000 award will be given to other qualified applicants from this group and include Class D, EM, Associate and Affiliate members. These awards are not renewable. However, students may reapply to the program each year they meet eligibility requirements. Awards are for undergraduate study only
2. One or more of the applicant's parents or grandparents must be an active class A, SM, C, A-Retired, SM-Retired, Affiliate, or AA member of MGCSA.
3. Although more than one student from the same family may apply, only one child/grandchild of any individual member can receive an award in the same year.
4. Current members of the Board of Directors and their families are not eligible to receive a LegacyScholarship.

Criteria for Selection:

1. The student must be enrolled or accepted to enroll in a university, college, junior college or technical school for the next academic year (verification required).
2. The student must demonstrate a broad base of interests including involvement in volunteer activities and outside employment.

Before your mail your application, make sure the following items are included:

- Transcripts from all high schools and universities/colleges attended.
- Typed original essay
- Graduating high school seniors must attach a collegiate letter of acceptance.

All applications must be received in the MGCSA business office no later than June 1st.

Mail Applications to: MGCSA, PO Box 2028, Maple Grove, MN 55311

MGCSA LEGACY SCHOLARSHIP APPLICATION FORM

Please type the entire form

Name _____

Date of Birth _____

Member Parent or Legal Guardian _____

Member Classification: _____

Home Address _____

City _____ State _____ Zip _____

Home Phone (_____) _____

Campus Address _____

City _____ State _____ Zip _____

Campus Phone (_____) _____

School where you are enrolled _____

Current major _____

Name of Advisor _____

Planned Degree _____

Date you plan to complete this degree _____

Grade Point Average _____

What degree(s), if any, do you already hold? (List degree, major and school)

APPLICANT'S STATEMENT

Please answer the following questions (*please type*).

List in chronological order high schools attended, then colleges. It is very important that this information be complete. *Actual or expected date of graduation.

Institution: _____ Location: _____

Dates: _____ *Graduation date (mo/yr): _____

GPA: _____ On a scale of: _____

Institution: _____ Location: _____

Dates: _____ *Graduation date (mo/yr): _____

GPA: _____ On a scale of: _____

Institution: _____ Location: _____

Dates: _____ *Graduation date (mo/yr): _____

GPA: _____ On a scale of: _____

➤ Are you now attending a college or university (circle)? Yes No

If yes, which college/university: _____

If no, have you been accepted to a college/university (circle)? Yes No

Which college/university: _____

➤ List any academic distinctions and honors you have received during high school or

college: High School

College

- List high school or college activities in which you have participated (athletics, clubs, school paper, fine arts, etc.).

High School

College

- List activities outside of school or college (associations, clubs, community, etc., and any offices held).

- List employment you have held in the past four years. Include military experience.

Type of Work	Employer and Address Supervisor and Phone Number	Employed From	To
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- In what ways have you contributed toward your financial support while in school or college?

- Do you qualify for in-state tuition? Yes No

➤ While in college, are you contributing toward anyone else's support? Yes No

If yes, please indicate name, relationship and ages of those you will be supporting.

Name	Relationship	Age
_____	_____	_____
_____	_____	_____
_____	_____	_____

➤ List any other scholarships awarded:

Scholarship	Sponsor	Date	Amount
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____

➤ Please give the name(s) and address (es) of your local and school newspaper(s):

I certify that the above information is true and correct to the best of my knowledge. Any false information given will automatically void this Legacy Scholarship application.

Signed: _____
(Full Name of Applicant)

The applicant is responsible for the timely submittal of the attached "Advisor's Report." This must be delivered to the appropriate advisor with a request that the form be completed and returned to:

MGCSA Scholarship Committee, Po Box 2028, Maple Grove, MN 55311

Note: Only completed applications will be eligible for consideration.

**MGCSA Legacy Scholarship Application
Academic Advisor's Report
(Please type entire form)**

Candidate _____

Home Address _____

City _____ State _____ Zip _____

The advisor designated by the candidate should make this report. Please mail the completed report to the address at the bottom of this form. All responses are confidential.

What is the applicant's area of study? _____

How well does this applicant work independently? _____

Does the applicant have well-defined objectives? _____

Does the applicant exhibit leadership qualities? _____

Has the applicant been a superior, good, indifferent, or poor citizen of the school?

Does the applicant intend to pursue golf course management as a career?

Class Rank? _____ In a class of _____
(Highest is 1) (Number in Class)

The goal of the MGCSA is to identify tomorrow's leading professionals. Does this applicant meet that goal? Why?

Hours of Study _____ Grade Point Average _____

I do _____ do not _____ recommend that this student be granted a scholarship.

Signed _____

School _____

Date _____

Mail to: MGCSA Scholarship Committee, PO Box 2028, Maple Grove, MN 55311