

Hendricks County Master Gardener Scholarship Guidelines

About the Program

Scholarship Description:

The Hendricks County Master Gardener (HCMG) Scholarship is a scholarship for students pursuing an education in one of the following:

- University or Technical School in an Indiana Undergraduate or Graduate School.
- Continuing Adult Education.
- Preference will be given to students pursuing a Horticulture Degree, Certificate or related Agriculture Field.

Eligibility:

Applicant must be a Hendricks County, Indiana resident.

Scholarship Amount:

Two ~ \$2000 scholarships awarded directly to the learning institutions.

Scholarship Eligibility Criteria:

Recipient is required to be a full-time student, to maintain a minimum C GPA, and have a confirmed enrollment at any accredited college, university or technical school in Indiana in a program of your choosing. Previous scholarship applicants may re-apply. Should the applicant drop out of school, the learning institution will be instructed to return the scholarship money to the HCMG. An applicant cannot be a family member (including spouse, brother or sister by whole or half blood, child, step-child grandchild, great grandchild) of the chairperson who is currently serving the HCMG Scholarship Committee.

Scholarship Deadline:

Postmarked no later than **April 15, 2023**

Required Documents

- Completed application, including
 - an essay of no less than 200 words
 - information on clubs, organizations, community and/or civic involvement
 - authorized release to use name for news media
- Two (2) Letters of recommendation from a mentor, teacher, employer, etc.
- *Proof of enrollment (i.e., Class schedule) for following Semester as a full-time student These documents must be sent to the same address as original scholarship application*

Application Review and Award Process

- All applications will be reviewed without knowing names by the HCMG Scholarship Committee
- Winners will be notified by **May 4, 2023**.
- Winners will be invited to the Master Gardener Association Meeting on **May 16, 2023** to be introduced as the winning recipients and given a few minutes to inform the Association of their future plans.
- A press release will be issued
- August 1st a check will be issued to the office of financial aid to the recipient's chosen learning institution with instructions on how to handle payment, including dropout issues

Contacts

- Questions may be directed to Scholarship Chairperson **Jan Myers. 317-313-1777**
- Applications are to be mailed to:
Hendricks County Extension
Office Attn: HCMG Scholarship
Committee
P.O. Box 7
Danville, IN 4612

Hendricks County Master Gardener Scholarship Application

Applicant Profile

1. Legal Name:
2. Name to Use in Publicity:
3. Home Address:
4. Phone:
5. Applicant Email:

Narrative

1. In 200 words, explain why the scholarship committee should choose you as a scholarship recipient:

Educational Plans

1. College/School of Acceptance:
2. Campus Address:
3. Area of Study:

Support Documentation

Attach the following items with your application submission:

- Two (2) letters of recommendation from Advisor, Educator, Mentor, Employer, etc.
- A copy of your college/school acceptance letter.

Statement of Applicant

I certify the information provided in the online application is, to the best of my knowledge, true and correct. I certify that I am not the family member (including spouse, brother or sister by whole or halfblood, child, step-child, grandchild, great grandchild) of the chairperson who is currently serving the Hendricks County Master Gardener (HCMG) Scholarship Committee. I understand this application is subject to verification by HCMG Scholarship Committee at its discretion.

Signature of Applicant: _____ Date: / /

Press and Media Release

I hereby authorize the HCMG Scholarship Committee to release any information necessary for the completion and processing of my application for a scholarship. I also authorize the use of my name, photograph and application information for press and media purposes. If applicant is under 18 years old, a guardian must also sign below.

Signature of Applicant: _____ Date: / /