



Arizona Landscape Contractors' Association

5245 East Bell Road, Suite 105 • Scottsdale, AZ 85254 • 602-626-7091 • Fax: 602-626-7590

SCHOLARSHIP APPLICATION

We are very happy that you are considering or have chosen a career in landscaping. We believe an ALCA scholarship is an excellent opportunity for students who are serious about the business of landscaping. Please use the checklist to make sure that you have included everything you need to start this process successfully. Again, thank you for applying. If you are selected for an award, you will be notified in writing.

- **APPLICATION FOR CONSIDERATION**
- **PERSONAL REFERENCE LETTER**
- **SCHOLASTIC REFERENCE LETTER**
- **ANSWERS TO ESSAY QUESTIONS**

Essay questions:

The answer to each question should not exceed more than ½ a page type written.

- **What is the biggest challenge facing the landscape industry in Arizona?**
- **Why have you chosen to continue your education in landscaping?**

Mail completed applications to:

**ALCA Scholarship Committee
5425 East Bell Road, Suite 105
Scottsdale, AZ 85255**

THE DEADLINE FOR A SCHOLARSHIP IS MAY 31.

The Arizona Landscape Contractors' Association (ALCA) was started in 1965. The membership is made up of both installation and maintenance contractors and the suppliers with whom they do business. The organization has many functions, but one of its primary responsibilities is education. With that in mind, ALCA established a scholarship fund. Most awards are \$500 and are distributed to applicants based on merit and course of study. Should you have any questions about ALCA scholarships, please call the office at (602) 626-7091.



Arizona Landscape Contractors' Association

5245 East Bell Road, Suite 105 • Scottsdale, AZ 85254 • 602-626-7091 • Fax: 602-626-7590

SCHOLARSHIP APPLICATION

Full Name _____
Last First Middle

Address _____

City _____ State _____ Zip _____

Phone (home) _____ (work) _____ SSN _____

United State Citizen? _____yes _____no

Institution where the scholarship will be applied _____

Employer _____ Phone _____

Educational Background:

Name of school now attending _____

Name of school or continuing educational program planning to attend _____

If currently a student:

- Major _____ Minor or specialization _____
- Year currently in school (check one): High School Senior _____
College: Freshman _____ Sophomore _____ Junior _____ Senior _____
- How many years in college _____ Expected date of graduation _____
- Total number of college units completed _____
Number of college units currently carrying _____ (Indicate semester _____ or quarter _____)
- Overall college grade point average _____ Grade point average in major _____

Please list high schools and colleges attended.

Current official (with seal) high school and college transcript for each school attended must be attached to application form or sent directly to the ALCA office to be eligible for awards. Last high school or college quarter or semester completed must be on transcript. (Note: Be sure to contact schools early to allow transcripts to be sent on time.)

- _____
- _____
- _____
- _____
- _____

Please list industry trade schools attended or certification classes completed. Please include dates.

- _____
- _____
- _____
- _____
- _____

Activities:

List any awards, honors, scholarships, etc. you have received:

College: _____

High School: _____

Activities related to horticulture (if not listed above):

College: _____

High School: _____

Community: _____

Other activities and offices held (college, high school, community):

Work Experience

List all work experience in which you have participated, whether or not related to horticulture.

Employer:

Job Title or Duties:

Dates:

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Educational and Occupational Goals:

Outline your educational objectives:

Other than this scholarship, what funding do you plan to use for your college or continuing education?

Outline your occupational goals as they relate to the landscape and/or horticulture industry:

Personal References:

Please submit at least 2 letters of recommendation with this application or have them sent to the ALCA office. At least one letter should be from a recent instructor or counselor and at least one from a present or most recent employer, club/activity advisor, community or church leader.

Signed _____ Date _____

Social Security Number _____