



## Scholarship Application

The Naples Orchid Society offers a \$2000 annual scholarship to be awarded to a qualified student pursuing a program in Botany, Conservation or Environmental Science. Preference will be given, but not limited, to a student studying/working in SW Florida on a worthy orchid related project. The Scholarship may also be used to fund, or partially fund, an internship at an appropriate organization.

### Section I – Biographical Information

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ M.I.: \_\_\_\_\_

School you will attend in Fall Semester: \_\_\_\_\_

Academic status as of Fall \_\_\_\_\_ (year): (Please check one)

Sophomore \_\_\_\_\_ Junior \_\_\_\_\_ Senior \_\_\_\_\_ Graduate \_\_\_\_\_ Adult C.E. \_\_\_\_\_

Current Major (if applicable): \_\_\_\_\_

Cumulative GPA: \_\_\_\_\_

Anticipated Date of Graduation or completion of studies: \_\_\_\_\_

Home Address: \_\_\_\_\_

School Address (if different): \_\_\_\_\_

E-mail: \_\_\_\_\_

Phone (land): \_\_\_\_\_ Phone (cell): \_\_\_\_\_

### Section II – Project & Personal Information

1. Please describe your proposed project or internship for this Scholarship.

**2. What are your career and personal goals? (150 words or less)**

**3. List any organizations to which you belong, including offices held.**

**4. Any positions of leadership your have held.**

**5. What else would you like to tell us about yourself? (150 words or less)**

## **Section III – Letters of Recommendation, Official Transcript & References**

Please request that an **official transcript** be sent from your university or college, and submit **three letters of recommendation**, two from your professors or teachers and one non-academic from a person in your community that can focus on your community involvement and service. Letters of recommendation may be mailed separately or included with your application. Supporting documents may be mailed directly to the: **Naples Orchid Society, PO Box 7998, Naples, Florida 34101**

### **Community Reference**

**Name:** \_\_\_\_\_

**Occupation / Title:** \_\_\_\_\_

**Phone (land or cell):** \_\_\_\_\_

**E-mail address:** \_\_\_\_\_

### **Faculty Reference (1)**

**Name:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**University or College:** \_\_\_\_\_

**Phone (land or cell):** \_\_\_\_\_

**E-mail address:** \_\_\_\_\_

### **Faculty Reference (2)**

**Name:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**University or College:** \_\_\_\_\_

**Phone (land or cell):** \_\_\_\_\_

**E-mail address:** \_\_\_\_\_

**Faculty Reference (3)**

**Name:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**University or College:** \_\_\_\_\_

**Phone (land or cell):** \_\_\_\_\_

**E-mail address:** \_\_\_\_\_

**Section IV – For Internship Applicants Only**

**Organization where Internship will be performed:** \_\_\_\_\_

**Address of Organization:** \_\_\_\_\_

**Dates of Internship (start):** \_\_\_\_\_ **(end):** \_\_\_\_\_

**Name of Supervisor:** \_\_\_\_\_

**Supervisor's Phone (land or cell):** \_\_\_\_\_

**Supervisor's e-mail address:** \_\_\_\_\_

**Brief Description of Internship Activity:**

Please ask the Internship Supervisor to submit a letter describing the Internship and the nature of the supervision for the Application. Also please ask the Supervisor to submit a report summarizing the Internship at its conclusion to the: **Naples Orchid Society, PO Box 7998, Naples, Florida 34101**