TEXAS SPORTS TURF MANAGERS' ASSOCIATION Dr. James McAfee STUDENT SCHOLARSHIP APPLICATION FORM

Name:
Present Address:
City, State, Zip:
Telephone:
Permanent Address:
City, State, Zip:
Education Institution:
Faculty Advisor / Position:
Class Rank:FreshmanSophomoreJuniorSeniorGraduatePost Graduate
Major Field of Study:
Number the specializations (1,2,3, etc.) which most interest you and which you are currently pursuing through your education:
Golf Course ManagementRecreationSports Turf ManagementPark AdministrationTurfgrass ScienceLandscape DesignAgronomyNursery ManagementOrnamental HorticulturePlant PropagationSoil SciencePlant Materials
Landscape Management Arboriculture Landscape Contracting Other (Specify)
Number of units completed (all college work):
Cumulative Grade Point Average:
Expected Date of Graduation:

List any awards, honors, or scholarships that you have received:

List activities in which you have participated related to your school, department, or community:

List professional associations and university organizations to which you belong, including offices to which you have been elected or appointed:

Career Objectives and Educational Goals:

Related Work Experience (if any):

Do you have arrangements for summer employment at a Sports Turf Facility?

Are you interested in obtaining such employment?

APPLICATION DEADLINE IS DECEMBER 1, 2019

NOTE: Any materials received AFTER December 1, 2019 will NOT be accepted for scholarship consideration.

Please return form to:

Texas Sports Turf Managers' Association - Scholarship Committee 4211 Fairway Dr. #16 Granbury, TX 76049

Or e-mail: <u>txstmainfo@yahoo.com</u>

Faculty Advisor Form Please submit one form from current Faculty Advisor

Student Name:

I recommend the above-named student for a Texas Sports Turf Managers' Association scholarship.

Please comment on the student's potential for success in the sports turf profession, in regards to:

1. Character:

2. Integrity:

- 3. Punctuality:
- 4. Attitude:
- 5. Aptitude:
- 6. Career Potential in Sports Turf Management:

Print Name:

Position:

Facility:

Signature:

Date:

Please send completed form to:

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