2025 Scholarship Application



Full Name		
Street Address		
City	State	Zip Code
Phone Number	Email	-
Date of Birth		
College/University		
Street Address		
City	State	Zip Code
Department Enrolled		
Major		
Current Grade Level at Time of Application		
Current GPA Exp	ected Graduation	n Date
Name of Financial Officer		
Street Address		
City	State	Zip Code
Phone Number	Email	
Extracurricular Activities, Clubs and Organiza	ntions:	

Recent academic honors:	
Employment experiences in horticulture-related industries – please provide contact information length of employment:	and
Application Deadline: March 31, 2025 Scholarship Recipients will be notified by April 15, 2025	
Student's Signature Date	
Questions? Contact Scholarship Chairperson, Lisa Colburn info@AllamandaGardenClub.com or call: (207) 404-3494	
Please email the application to: info@AllamandaGardenClub.com	
Or. snail mail to:	

Allamanda Garden Club or North Port, Inc. PO Box 7975, North Port, FL 34290