

# 2026 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  Expected Graduation Date

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Name of Financial Officer

Street Address

City  State  Zip Code

Phone Number  Email

Extracurricular Activities, Clubs, and Organizations:

Recent academic honors:

Employment experiences in horticulture-related industries – please provide contact information and length of employment:

Application Deadline: **March 31, 2026**  
Scholarship Recipients will be notified by **April 15, 2026**

Student's Signature

Date

Questions? Contact Scholarship Chairperson, Lisa Colburn  
[info@AllamandaGardenClub.com](mailto:info@AllamandaGardenClub.com) or call: (207) 404-3494

Please *email* the application to: [info@AllamandaGardenClub.com](mailto:info@AllamandaGardenClub.com)

Or, *mail* to:  
Allamanda Garden Club of North Port, Inc. PO Box 7975, North Port, FL 34290