

# Scotts LawnService Scholarship/Internship APPLICATION

Department of Horticulture and Crop Science  
The Ohio State University  
Columbus, Ohio 43210

## GENERAL INFORMATION

(Please print or type)

Date\_\_\_\_\_

Name\_\_\_\_\_ Student ID \_\_\_\_\_

Parents' Names\_\_\_\_\_

Permanent Address\_\_\_\_\_

County (if Ohio)\_\_\_\_\_

Campus Address\_\_\_\_\_

Home Phone\_\_\_\_\_ Campus Phone\_\_\_\_\_

E-Mail\_\_\_\_\_

Home Newspaper and Address\_\_\_\_\_

(Optional: Please Include A Picture of Yourself)

Ohio Resident? ☐ Yes ☐ No

High School from which I graduated and Address\_\_\_\_\_

\_\_\_\_\_

CGPA at O.S.U.\_\_\_\_\_

Other colleges attended\_\_\_\_\_

Years Attended\_\_\_\_\_ Degree\_\_\_\_\_

My first quarter/semester at O.S.U.: Autumn Winter Spring Summer  
Year\_\_\_\_\_

In Summer 2014, I will be a: Freshman Sophomore Junior Senior

I plan to graduate \_\_\_\_\_ quarter. What year? \_\_\_\_\_

Number of credit hours completed at Ohio State through  
Fall Semester 2013 \_\_\_\_\_

Major \_\_\_\_\_

Academic Advisor \_\_\_\_\_

**Personal Statement**

Use this space to give information about your ambitions, goals, backgrounds, and financial need that would assist the committee in judging your eligibility for this scholarship/internship. In addition, please include a resume.

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I affirm that the information I have provided on this application, or any supportive financial aid materials is complete, accurate, and true to the best of my knowledge. I understand that furnishing false information may result in revocation of my financial assistance or may result in disciplinary action pursuant to the *Code of Student Rights and Responsibilities*.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

Deadline: **December 3<sup>rd</sup>, 2013**

Submit: **Completed Application, Resume, and Personal Statement**

To: David Gardner  
344 Howlett Hall  
Mailbox: Howlett 207

Regina Vann Hickok  
234 Kottman Hall