

TENNESSEE FEDERATION OF GARDEN CLUBS, INC.

SCHOLARSHIP APPLICATION FORM—2025-2027

Name in Full: _____

Social Security Number: _____ Date of Birth: _____ Phone: _____

Home (Legal) Address: _____ Email: _____

College/University: _____ Phone: _____

School Address: _____

Dept. in Which Enrolled: _____ Major: _____ Minor: _____

Present Status: Sophomore _____ Junior _____ Senior _____ Graduate Student _____

Current Cumulative Grade Point Average: _____

Schools Previously Attended: _____

Dates: _____

When Do You Expect to Graduate? _____ Degree: _____

Occupational Objective After Graduation: _____

Name of Financial Aid Officer: _____ Phone: _____

Address: _____ Email: _____

The application form, grade transcript, financial aid form, **signed** personal letter by applicant, list of activities/honors, and three recommendation letters must be typed on one page each, single-spaced, sent as one packet, and received by the application deadline: **December 31**. The personal letter, single-spaced, by the applicant should discuss background, career goals, financial need, and commitment to chosen field of study. These letters should not exceed *one* typed page each. List extracurricular activities and honors separately. No additional materials will be accepted.

SEND TO: TFGC SCHOLARSHIP CHAIR: Candace Wells, P.O. Box 325, Lookout Mountain, TN, 37350-0325;
email cfw1865@gmail.com for inquiries.