

**WOMEN OF ASTORIA GOLF & COUNTRY CLUB  
P. O. Box 148 Astoria, Oregon 97103**

**SCHOLARSHIP APPLICATION COVER PAGE**

Applicant's Name \_\_\_\_\_

High School \_\_\_\_\_

Parent or Guardian \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Telephone# \_\_\_\_\_ Email \_\_\_\_\_

**SCHOLARSHIP RECIPIENT SELECTION CRITERIA:**

1. Must be a senior at Astoria, Warrenton, Seaside, Knappa or Ilwaco High Schools
2. Must be a member of the school golf team or have participated a minimum of two years in the AGCC Junior Golf program
3. Must be a student in good academic standing – averaging B or better
4. Must provide a current copy of high school transcript with application
5. Must plan to attend an accredited or licensed educational/professional-technical institution as a full-time student
6. Must submit proof of acceptance to accredited or licensed educational/professional-technical institution
7. Must complete a short essay and accomplishments sheet
8. Must submit three completed Recommendation Forms
9. Completed forms with Scholarship Application Cover Page must be received by April 16, 2018 at 5:00 p.m. to be considered

**THIS IS A ONE-YEAR, \$2000 DOLLAR SCHOLARSHIP WHICH MAY ONLY BE USED FOR TUITION AND/OR EDUCATION RELATED FEES: e.g., SCHOOL SUPPLIES, BOOKS**

**Applications must be typed or computer-generated. DO NOT add any additional material other than what has been requested. Please staple packet in the upper left hand corner. ONLY CANDIDATES WITH COMPLETE APPLICATIONS WILL BE CONSIDERED.**

I understand and agree to the conditions of this scholarship \_\_\_\_\_  
Applicant's Signature

For questions or additional information, you may contact Cheri Folk, Scholarship Chairperson at 503-738-2766 or email [cherifolk@live.com](mailto:cherifolk@live.com)

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**STUDENT ESSAY**

**In no more than this page – 12 pt. font – please tell us (1) about your educational goals beyond high school; (2) how receiving this scholarship will help you in meeting your educational goals, and (3) in what ways has participating in golf helped with your career goals and in the development of your character.**

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**STUDENT ACCOMPLISHMENT SHEET**

**IN WHAT HIGH SCHOOL SPONSORED ACTIVITIES AND COMMUNITY RELATED PROGRAMS  
HAVE YOU PARTICIPATED THAT HAVE CONTRIBUTED TO YOU AND YOUR SCHOOL? USE THIS  
PAGE ONLY. You may change size of spaces if needed.**

**SPORTS**

**STUDENT GOVERNMENT**

**SCHOOL ACTIVITIES**

**COMMUNITY VOLUNTEER EXPERIENCES**

**HONORS & AWARDS**

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**FORMS AND CHECK SHEET**

ATTACHED ARE THREE SCHOLARSHIP RECOMMENDATION FORMS WHICH SHOULD BE COMPLETED AND ATTACHED TO THE FINAL PACKET AS Pages 5, 6, &7.

FORM ONE SHOULD BE COMPLETED BY YOUR GOLF COACH OR SOMEONE FAMILIAR WITH YOUR EXPERIENCE IN THE JUNIOR GOLF PROGRAM AT AGCC.

FORM TWO SHOULD BE COMPLETED BY A SCHOOL COUNSELOR, ADMINISTRATOR, OR TEACHER.

FORM THREE CAN BE COMPLETED BY AN EMPLOYER, FAMILY FRIEND, OR AN ADULT WHO IS FAMILIAR WITH YOUR ACCOMPLISHMENTS. LETTERS OF RECOMMENDATION MAY BE SUBSTITUTED FOR THE FORMS.

Letters of Recommendation (One Page only) may be substituted for forms, but they must be on the recommender's letterhead or personal stationery.

YOUR SIGNED ANC COMPLETED APPLICATION PACKET (see below) SHOULD BE RETURNED TO THE ASTORIA GOLF & COUNTRY CLUB NO LATER THAN April 16, 2018, 5:00 p.m. THE APPLICATION CAN BE MAILED TO: P. O. BOX 148, ASTORIA, OREGON 97103, OR CAN BE DELIVERED TO THE AGCC OFFICE. PARTICIPANTS NOT MEETING THE DEADLINE WILL NOT BE CONSIDERED.

**APPLICATION CHECK LIST:**

- SIGNED COMPLETED APPLICATION FORM Pages 1 & 4
- STUDENT ESSAY AND ACCOMPLISHMENTS LIST Pages 2 & 3
- THREE RECOMMENDATION FORMS/LETTERS Pages 5,6 & 7
- CURRENT TRANSCRIPT Page 8

The information given and statements made in this application are correct to the best of my knowledge.

Date: \_\_\_\_\_

Signature of Applicant \_\_\_\_\_

Signature of Parent/guardian \_\_\_\_\_

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**GOLF – SCHOLARSHIP RECOMMENDATION**

APPLICANT \_\_\_\_\_

SCHOOL \_\_\_\_\_

RECOMMENDED BY: \_\_\_\_\_

RELATIONSHIP TO APPLICANT: \_\_\_\_\_

**Please explain why you believe this student should be considered for this \$2,000 college tuition scholarship for the 2018-2019 academic year.**

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**ACADEMIC – SCHOLARSHIP RECOMMENDATION**

**APPLICANT** \_\_\_\_\_

**SCHOOL** \_\_\_\_\_

**RECOMMENDED BY** \_\_\_\_\_

**RELATIONSHIP TO APPLICANT** \_\_\_\_\_

**Please explain why you believe this student should be considered for this \$2,000 college tuition scholarship for the 2018-2019 academic year.**

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**PERSONAL – SCHOLARSHIP RECOMMENDATION**

APPLICANT \_\_\_\_\_

SCHOOL \_\_\_\_\_

RECOMMENDED BY \_\_\_\_\_

RELATIONSHIP TO APPLICANT \_\_\_\_\_

**Please explain why you believe this student should be considered for this \$2,000 college tuition scholarship for the 2018-2019 academic year.**

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**ATTACH TRANSCRIPT HERE**



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