Northeastern Chapter
GCSAA
GOLF COURSE SUPERINTENDENTS ASSOCIATION OF AMERICA
PO Box 391, Latham, NY 12110 | (518) 783-1322 | Fax: (518) 783-1258 | northeasterngcsa@gmail.com

SCHOLARSHIP APPLICATION

Name: _____ **Date:** _____

Permanent Address	School Address
Email:	
Phone:	Phone:

Which condition are you applying under?: *(check one)*

- ❑ a) member of the NEGCSA
- ❑ b) immediate family member of a NEGCSA member
- ❑ c) employed by a NEGCSA member
- ❑ d) other (If the above requirements are not fulfilled, the applicant must submit a letter of recommendation from a member who is sponsoring his or her application.)

Member's Name: _____

Educational Background: (Candidate must be a matriculated student in at least their third year of a recognized four-year turfgrass management school, in their second year of a recognized two-year turfgrass management school or enrolled in a University short course program either in-person or remotely.)

_____

_____

Educational Goals: _____

_____

Career Objectives: _____

_____

Related Employment History: _____

_____

- ❑ Applicants must submit an article relative to turfgrass with the application.
- ❑ Applicants must submit a letter of recommendation from their sponsoring golf course superintendent.
- ❑ Applicants must supply a copy of their most recent college transcript with this application if applicable.
- ❑ Applicants must have complete applications postmarked no later than December 1, 2023.

Application Should be Addressed to: Northeastern GCSA, Attn: Scholarship Cte.
PO Box 391, Latham, New York 12110

Only complete applications will be considered.