

SOUTHERN ILLINOIS GOLF COURSE SUPERINTENDENTS ASSOCIATION

GENE SCHULTE MEMORIAL SCHOLARSHIP AWARD

The Gene Schulte Memorial Scholarship Award offers financial assistance to one (1) child or grandchild of a dues paying member of the Southern Illinois Golf Course Superintendent's Association per year in the amount of \$1000.00.

Requirements

For students to be eligible for the Scholarship Award, the following requirements must be met:

1. One or more of the applicant's parents or grandparents have been a dues paying member of the Southern Illinois GCSA for three or more consecutive years and must be a currently active member in one of the following classifications: A, B, C, Affiliate, Associate, or Retired in any of the same. The Scholarship Awards are open to any natural or adoptive children of a Southern Illinois GCSA member.
2. The student must be enrolled full time at an accredited institution of higher learning, or in the case of high school seniors, must be accepted at such an institution for the next academic year. Graduating high school seniors must attach a letter of acceptance to their application.
3. Past winners of the Scholarship Award are ineligible to apply.
4. Any number of students from the same family, that are eligible, may apply.

How to Apply

To apply, students must supply the following documents under one cover sheet:

1. A completed Scholarship Award application.
2. Transcripts from all high schools and colleges attended.
3. Graduating high school seniors must attach a collegiate letter of acceptance to their application.

Criteria of Selection

1. Applications may be verified for eligibility.
2. Scholarship(s) shall be awarded by random selection from the qualified applicants.
3. Financial need is not a factor in the selection process.

All application materials must be received by: _____

The Scholarship Award will be selected on _____ and the recipient will be notified by mail.

MAIL APPLICATION TO:

John Kueper

951 Clinton St.

Carlyle, IL. 62231

Southern Illinois Golf Course Superintendents Association

Gene Schulte Memorial Scholarship Award Application

Applicant Information

Name _____

Address _____

City/State//Zip _____

Phone # _____

Southern Illinois GSCA Member Information

Name _____

Address _____

City/State/Zip _____

Phone # _____

Relation to Applicant _____

Date of SIGCSA Membership _____

Place of Employment _____