

AHS Scholarship Application

Name _____
(Last) (First) (Middle)

Home Address _____

Home Telephone (_____) _____ E-mail _____

Social Security No. _____ Date of Birth _____

School Name _____ Grade _____

Address _____

Principal's Name _____ Phone _____

Advisor's Name _____ Phone _____

Grade Point Average- This year _____ Cumulative _____

How long in AHS? _____

Name of Local Daylily Club _____ President _____ Phone _____

Name of University/College planning to attend

Name _____

Address _____

Curriculum _____

(List each item on a separate page)

1. Application form
2. Daylily Club Activities (Shows, Hybridizing, attend regional/national please give dates etc.
3. School Organizations and Activities include awards, honors or special recognition you have received.
4. Letter explaining why you are applying for an AHS Scholarship and giving your plans for the future
5. Official Transcript included or requested to be sent

Note: all items must be included for the application to be considered

Mail to: Kathy D'Alessandro, AHS Youth Chair, 2076 Silo Lane, East Greenville, PA 18041

**Applications must be received before or on March 31.

AHS SA Form