

VIRGINIA FLOWER SHOW JUDGES COUNCIL

Elizabeth R. Lewis Flower Show School Scholarship Application

Applicant Information:

Name: _____ Date of application: _____

Address: _____

Phone Number: _____

E-mail: _____

Garden Club _____

Flower Show School Information:

Which Flower Show School Course will you be attending?

I _____, II _____, III _____ IV _____

Please provide the following information:

Date of school: _____ Location: (city) _____

Do you plan to take the course for credit (attend all sessions and take the three hour exam on the final day as well as the two point scoring exams in the applicable courses)?

Yes _____ No _____

Please indicate the Flower Show School course/s taken, the date, and whether or not the course was taken for credit and passed.

Course I Date: _____ Course taken for credit: Yes ___ No ___

Course II Date: _____ Course taken for credit: Yes ___ No ___

Course III Date: _____ Course taken for credit: Yes ___ No ___

Course IV Date: _____ Course taken for credit: Yes ___ No ___

Do you plan to become a flower show judge? Yes _____ No _____

If you answered "yes" to the above, then please explain why you would like to become a judge? (Please use a separate piece of paper.)

Are you applying for other scholarships? Yes _____ No _____ If so, please indicate the scholarship/s _____

Have you previously received a scholarship from the Virginia Flower Show Judges Council? Yes _____ or No _____