

# Application for the Glenn H. Burnett Scholarship

## Student Information

NAME: Last, First, Middle Initial \_\_\_\_\_

Academic Year \_\_\_\_\_

Mailing Address \_\_\_\_\_

Birthdate \_\_\_\_\_ Age \_\_\_\_\_ Telephone Number \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_

Email address \_\_\_\_\_

Are you a U.S. Citizen?  Yes  No

Year of High School Graduation or G.E.D. \_\_\_\_\_

Name of High School, City, State \_\_\_\_\_

High School Grade Point Average \_\_\_\_\_ Combined S.A.T. or ACT Score \_\_\_\_\_ Date of Exam \_\_\_\_\_

Acceptance Letter Attached \_\_\_\_\_ Currently Attending College Full Time \_\_\_\_\_

Other Colleges/Universities Attended and When \_\_\_\_\_

Extra Curricular Activities (include athletic and non-athletic activities, awards, leadership roles and experience.)

Name of Parent or Guardian (Last Name, First Name, Middle Initial) \_\_\_\_\_

Street Address, City, State, Zip Code \_\_\_\_\_

## References: High School Teacher

Name \_\_\_\_\_ Name \_\_\_\_\_

Address \_\_\_\_\_ Address \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_ City, State, Zip Code \_\_\_\_\_

Telephone Number \_\_\_\_\_ Telephone Number \_\_\_\_\_

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

## To Be Completed by the Licensed PCO

I do hereby nominate \_\_\_\_\_ for the GPCA Scholarship.

1. \_\_\_\_\_ has been employed by the firm for \_\_\_\_\_ years, as a \_\_\_\_\_

Parent or Guardian

Title

2. \_\_\_\_\_ has been an active member in good standing for \_\_\_\_\_ years.

Name of Company

3. \_\_\_\_\_ License number is \_\_\_\_\_

Name of Company

Licensed PCO's Name (Print) \_\_\_\_\_

PCO Signature \_\_\_\_\_ Date \_\_\_\_\_

Street Address, City, State, Zip Code \_\_\_\_\_

Thank you for completing this application  
Application Deadline: April 15  
Mail To:  
Georgia Pest Control Association  
2034 Beaver Ruin Road, Norcross, GA 30071  
770/417-1881 \* 800/465-9827

Application current 2021