2010 Scholarship Application Process

Dear Prospective Scholarship Recipient:

2010 heralds the 12th annual - New Leaf Market -Matthew Tansey Memorial Scholarship (hereafter *Scholarship*). It is offered to New Leaf Market members, as well as non-members, who are seeking training in a profession related to health, healing, or nutrition.

This Scholarship Committee has $1000 to award for actual education costs, limited to tuition, books, or related educational expenses.

Members of the New Leaf Market Board of Directors, the Scholarship Committee, or their immediate families are ineligible for funding under this program.

To apply for this Scholarship, you must:

1) Fill out the Application form completely, printing neatly, or preferably by typing.
2) Complete the essay portion of the application.
3) Sign the application.
4) Have three persons who know you well (excluding family) fill out the Scholarship Recommendation Form and, if possible, attach these three (3) recommendations with your Application (this ensures we receive a complete application, although those recommending you could send their form directly to us if they prefer).

All materials must be received by the Scholarship Committee (not just postmarked) by May 31, 2010. Mail or deliver to: New Leaf Market Scholarship Committee
c/o New Leaf Market
1235 Apalachee Parkway
Tallahassee, FL 32301-4543

New Leaf Market does not discriminate on the basis of age, gender, race, color, or creed.

If you are not accepted for a Scholarship this year, you may reapply in a subsequent year.

If you are accepted by the Scholarship Program, and you accept the Scholarship funds:

1) You must be enrolled in a course of study related to health, healing, or nutrition.
2) Your Scholarship monies will be given directly to the educational institution.
3) You agree to be present at the annual membership meeting in August, 2010 when scholarship recipients are announced..
4) You agree to share your acquired knowledge with the community via a lecture or workshop, or by writing an article for the *New Leaf News*, the details to be negotiated with New Leaf Market.
5) You may reapply in a subsequent year, if you continue to be eligible.

Thank you for your interest in our Scholarship Program.

The Scholarship Committee

2010 New Leaf Market - Matthew Tansey Memorial Scholarship

12th ANNUAL SCHOLARSHIP APPLICATION FORM

This scholarship is offered to New Leaf Market members, as well as non-members, who are seeking training in a profession related to health, healing, or nutrition.

Applicant's Name

_____

(First) (Middle) (Last)

Date of Birth _____

Mailing Address:

_____

(Street) (City, State) (Zip)

Phone: _____ Social Security # (we will ask for if needed)

What university, college, or certification program are you enrolled in?

_____

Entrance Date _____

Schools Attended:	Location:	Dates:	GPA:
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

ACT, SAT, or GRE score _____

List membership in church, school, civic, religious or other organizations, and list ways you have contributed, including offices held, and number of years you were a member or a volunteer.

_____

_____

_____

_____

_____

_____

List any honors you have received, or scholarships awarded.

Award Sponsor Date Reason for Receipt

_____

_____

_____

Last 3 jobs:

Place of Employment Position Duties Date

_____

_____

_____

Financial Information

Fill in costs below. Attach FAFSA or fill in resource information below:

Item	**Estimated Cost**
Tuition/Fees	$
Books/Supplies	$
Other Educational Expenses for program Specify _____ _____ _____	$
Total	$

Resource	**Amount**
Grants	$
Scholarships	$
Work Study Programs	$
Savings	$
Family	$
Total	$

Do you have any other family/financial responsibilities we need to be aware of ?

_____

_____

ESSAY: Attach a typed, double-spaced essay (maximum 500 words). Discuss your educational plans, including major area of study, area of specialization, and ultimate occupation you hope to pursue. Be sure to explain how your interests relate to health, healing, or nutrition.

I authorize my school _____ to give information about my academic records to the New Leaf Market Scholarship Committee.

Yes ____ No ____

1. Preference will be given to candidates in courses of study related to health, healing and nutrition. Preference may also be given to candidates who are members of the New Leaf Market cooperative (or their immediate family).
2. Scholarship monies will be given directly to the educational institution.
3. Selected scholarship recipients agree to share their acquired knowledge with the community via a lecture or workshop, or by writing an article for *Natural Times*, the details of which will be negotiated with New Leaf Market.
4. Eligible candidates may reapply in subsequent years.
5. New Leaf Market board members, the scholarship committee, and their immediate families are not eligible for this scholarship.

I understand the criteria listed above. If selected, I agree to negotiate to share my knowledge with the community. To the best of my knowledge, the information submitted in this application is complete and true.

_____

(Applicant's Signature) (Date)

Submit this application, your typed essay, and three nomination forms by May 31, 2010. Bring or mail to New Leaf Market Scholarship Committee, New Leaf Market, 1235 Apalachee Pkwy., Tallahassee, FL 32301-4543.

2010 Scholarship Recommendation Process

To those interested in recommending an individual for this scholarship:

2010 heralds the 12th year of the New Leaf Market - Matthew Tansey Memorial Scholarship (hereafter *Scholarship*). It is offered to New Leaf Market members, as well as non-members, who are seeking training in a profession related to health, healing, or nutrition.

This Scholarship Committee has $1000 to award for actual education costs, limited to tuition, books, or related educational expenses.

Members of the New Leaf Market Board of Directors, the Scholarship Committee, or their immediate families are ineligible for funding under this program.

To apply for this Scholarship, the applicant must:

5) Fill out the Application form completely, printing neatly, or preferably by typing.
6) Complete the essay portion of the application.
7) Sign the application.
8) Ask the student if they prefer to collect your completed nomination form from you in order to present a complete application, or if they would like you to mail or deliver it to the address below.

All materials must be received by the Scholarship Committee (not just postmarked) by May 31, 2010.

New Leaf Market Scholarship Committee
c/o New Leaf Market
1235 Apalachee Parkway
Tallahassee, FL 32301-4543

New Leaf Market does not discriminate on the basis of age, gender, race, color, or creed.

If applicants are not accepted for a Scholarship this year, they may reapply in a subsequent year.

If applicants are accepted by the Scholarship Program, and they accept the Scholarship funds:

6) They must be enrolled in a course of study related to health, healing, or nutrition.
7) The Scholarship monies will be given directly to the educational institution.
8) They agree to be present for the annual membership meeting to receive the Scholarship.
9) They agree to share their acquired knowledge with the community via a lecture or workshop, or by writing an article for *Natural Times*, the details to be negotiated with New Leaf Market.
10) They may reapply in a subsequent year, if they continue to be eligible.

Thank you for your interest in our Scholarship Program.

The Scholarship Committee

2010 New Leaf Market - Matthew Tansey Memorial Scholarship

SCHOLARSHIP RECOMMENDATION FORM

This scholarship is offered to New Leaf Market members, as well as non-members, who are seeking training in a profession related to health, healing, or nutrition. Application deadline is May 31, 2010.

Applicant's Name

_____

(First) (Middle) (Last)

Date of Birth _____

What university, college, or certification program is the student enrolled in?

_____ _____ Entrance Date _____

(Name) (Location)

Please state why you believe the applicant should be considered for this scholarship. Include supporting information such as family background and/or financial need.

_____

_____

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_____

_____

_____

_____

Name (print): _____

Place of Employment _____ Position _____

Address: _____

Phone Number: _____ Relation to applicant: _____

Signature _____ Date _____

2010 New Leaf Market - Matthew Tansey Memorial Scholarship

SCHOLARSHIP RECOMMENDATION FORM

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Applicant's Name

_____

(First) (Middle) (Last)

Date of Birth _____

What university, college, or certification program is the student enrolled in?

_____ _____ Entrance Date _____

(Name) (Location)

Please state why you believe the applicant should be considered for this scholarship. Include supporting information such as family background and/or financial need.

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Name (print): _____

Place of Employment _____ Position _____

Address: _____

Phone Number: _____ Relation to applicant: _____

Signature _____ Date _____

2010 New Leaf Market - Matthew Tansey Memorial Scholarship

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Applicant's Name

_____

(First) (Middle) (Last)

Date of Birth _____

What university, college, or certification program is the student enrolled in?

_____ _____ Entrance Date _____

(Name) (Location)

Please state why you believe the applicant should be considered for this scholarship. Include supporting information such as family background and/or financial need.

_____

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_____

Name (print): _____

Place of Employment _____ Position _____

Address: _____

Phone Number: _____ Relation to applicant: _____

Signature _____ Date _____