



West Texas Golf Course Superintendents Association
Official Scholarship Application Fall 2026

Purpose: The West Texas GCSA will provide scholarships for students who will be attending accredited colleges. Applicants must be enrolled in a college turfgrass program for the 2026 fall semester **OR** be a child of a current member of the association who will be attending a college or university for the 2026 fall semester. In evaluating each application, the scholarship committee will also consider service and participation in school and civic activities, scholastic merit and financial need.

Criteria: The applicant or parent must be a current member of the association. The applicant must have at least a 2.5 college GPA (grade point average) or an 85 high school GPA. Please type or print legibly! Another sheet of paper may be used for additional information.

Student's Name _____
Last First Middle

Home Address _____
Street City State Zip

Current Address _____
Street City State Zip

Home Phone Number (____) _____

Mobile Phone Number (____) _____

High school/college you currently attend: _____

Mailing Address _____ City, State Zip _____

Email Address _____ Area(s) of Study _____

Classification (current) _____ GPA as of last semester (attach copy of transcript) _____

Are you a full-time student? Yes ___ No ___

College you will be attending for the Fall 2026 semester: _____

Mailing Address _____ City, State Zip _____

Field(s) you wish to pursue upon graduation from college: _____

Activities or organizations you have participated in for school or community: _____

Special recognitions or awards received: _____

List experience in golf course maintenance or other turf-related fields: _____

List experience you have in any other field(s): _____

Are you currently a member of this association? _____ If so, how long? _____

List other associations of which you are a member:

If a parent is a member of the WTGCSA, fill in the following:

Member's Name _____

Business _____ Occupation _____

Number of years a member of WTGCSA: _____

Include the following with your application. Application WILL NOT be valid without these.

- -a one-page essay explaining your reason for requesting the WTGCSA to invest in furthering your education
- -a copy of your college or high school transcript
- -a letter of recommendation from an employer, instructor or faculty advisor on their company/institution letterhead that is dated and signed
- -a current job resume (any type of full-time or part-time jobs held)

Please mail or email application and materials listed above to: (** if mailing, please send a notification email)

WTGCSA - PO Box 66 - Gail, TX 79738

wtgcsa@wtgcsa.net

Scholarship money will be sent, upon proof of enrollment, directly to the college to be applied to your account.

Student's Signature _____ Date _____

Application Deadline is April 1, 2026

For Scholarship Committee chairperson

Scholarship Awarded: Yes _____ No _____ Signature of Chairman _____ Date _____