



**Hawaii Tropical Flowers & Foliage Association
Kauai Chapter, Inc. (HTFFA)
Scholarship Program & Application Form**

The Hawaii Tropical Flowers & Foliage Association- Kauai Chapter, Inc. is an organization whose members are either actively farming tropical flowers and or foliage, are interested in becoming active growers or are in the floral industry as wholesalers or retailers. Its role is to promote Kauai's flower industry and to provide current and relevant information to assist growers and shippers of tropical flowers and foliage.

Program: A \$1000 scholarship will be awarded each year to Kauai residents who are undergraduate or graduate students studying an agriculture field. Agriculture fields include general agriculture, aquaculture, or closely related field. Food science and nutrition majors do not qualify.

1. The scholarships will be based on scholastic achievement, participation in school and community activities and agricultural experiences.
2. Special consideration will be given to applicants who currently intend to pursue their career on Kauai.
3. Special consideration will be given to applicants with a demonstrated career interest in the tropical flower, foliage and nursery industry.

Qualifications:

Kauai Resident

High school graduating seniors, undergraduate students and graduate students may apply.

Majoring in an agricultural field

Grade Point average of 2.5 or better

Conditions:

Deadline for application March 30th.

Provide current academic transcript

Provide 3 letters of recommendation

Disbursement requires proof of enrollment through financial aid office

Committee's decision is final

Income tax returns may be requested to assist Committee in verifying need.

General Information:

Name: _____ Social Security # ____/____/____

Mailing Address: _____

Date of Birth: _____ Place of Birth: _____

Current School _____ GPA: _____

Father/Guardian: _____ Occupation: _____

Mother/Guardian: _____ Occupation: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

Total Family Gross Income: (Include all members of the family) for one year _____

Up to \$25,000 _____

\$25,000 to \$50,000 _____

\$50,000 to \$75,000 _____

Over \$75,000 _____

Why do you feel you deserve this scholarship?

(Additional sheets may be added)

Please describe your involvement in the following areas, including any awards, special acknowledgements, etc.: academic, community service, sports, clubs, and organizations, Hobbies/special interests, job/work experience.

(Additional sheets may be added)

Certification:

1. I hereby certify that the information provided in this application was compiled and written solely by the undersigned and that the data is true and correct as of this date.
2. I consent to the review and release of this application to the appropriate persons in HTFFA and understand that HTFFA requires my Social Security Number for its records.
3. I agree and grant permission to HTFFA for the use of my name and other information for the purpose of promotion, advertising, recognition and/or news releases including publications, without promise of favor or payment. Documents received will be used solely by HTFFA.

Applicant Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____
(For family income certification)

**MAIL COMPLETED APPLICATION, THREE (3) LETTERS OF RECOMMENDATION
AND CURRENT TRANSCRIPT TO:**

HTFFA
P.O. Box 2015
Kapaa, Hawaii 96746

Questions regarding the Scholarship may be directed to:
Dotty Yadao - Scholarship Chair [dotty @yahoo.com](mailto:dotty@yahoo.com)
Johnny Gordines – President Gordines@kauaiflowers.com