



GLSSA College Scholarship Program

Scholarship Application

Application due by September 15, 2026.

Email Application to: contact@glssami.org

Section 1

Name _____ SS# _____
Last _____ First _____ Middle _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Birth Date _____

Parental / Guardian Information:

Name _____

Employer _____

Section 2

High School _____

Graduation Date _____ Class Rank _____

Cumulative Grade Point (For grades 10 – 12) _____

SAT Scores Verbal _____ Math _____ Total _____

ACT Composite Score _____

List all Honors, Awards, Extra-curricular Activities, Club/ Organization Memberships, etc.



GLSSA College Scholarship Program

Scholarship Application

Section 3

List the college or university to which you have been accepted or those who have accepted your application: _____

State the Course of study you intend to pursue and academic goals you wish to achieve:

State any identifiable career / employment goals, especially as they might apply to the sanitary maintenance industry.

On a separate sheet, please prepare a brief essay as to why you would be the best candidate for this scholarship. Attach this essay to your application.

Section 4

Give the names of two people recommending you and attach their recommendations to this application. Please note that one recommendation must be from a teacher, counselor or high school administrator.

Print Name	Home Phone	Work Phone
------------	------------	------------

Print Name	Home Phone	Work Phone
------------	------------	------------

By signing below, I do hereby agree that all of the above information is true and accurate and that I have in no way attempted to falsify any information.

Signature _____ Date _____

Please Note: For this application to be complete, you must include verification of your current GPA, the letters of recommendation and transcripts for grades 10, 11 and 12.