

**North Carolina Association of Zoning Officials
Scholarship Application**



CONTACT INFORMATION

Name _____
Address _____

Home Phone _____
Cell Phone _____

E-Mail Address _____

EDUCATION

Please provide Name, Location, and Dates of Attendance

High School _____
College or University _____
Professional or Graduate _____

Are you currently enrolled in a college or university?
 Yes No

If currently enrolled, what is your major? _____

ACTIVITIES

Tell us about yourself. What is your field of study, what do you want to do once you graduate? (You may attach a separate sheet if needed.)

REFERENCE LETTERS

Please list references not related to you. Three letters of reference are required. Please attach to complete application.

NAME	RELATIONSHIP	PHONE NUMBER

SIGNATURE

I understand and agree that any funds received through the NCAZO Scholarship Program shall be used towards advancing my education.

Name Date

Please return complete application to:
Reginald Buie, CZO; Town of Garner, 900 Seventh Ave. Garner, NC 27529
(919) 773-4446; rbuie@garnernc.gov

Office Use Only	
Date Received at NCAZO Office	_____
Application Complete	<input type="checkbox"/> Yes <input type="checkbox"/> No