Deadline: Friday, May 1, 2015

www.pgcdpc.com

Prince George's County Drug Policy Coalition, Inc.



2015 Scholarship Application

Applicant's Name:	_	
(First)	(M.I.)	
Street Address:		Apt No:
City: Sta	nte:	Zip Code:
Phone (home): E-mail Address:		
High School or College:		
SAT (or ACT) Composite Score: GPA:		
Please include the following documentation with your application:		
Essay: Discuss what you think are sor with the recent legalization of marijuana		•
Specifications: One page, minimum 250 words, Times New Romans font, size 12, 1 inch margins.		
Resume: Emphasizing all of your community service activities, extracurricular and/or work experiences.		
High School or College Transcript		
Two references (include names, addresses, and phone numbers)		
*Applicant must reside in District 8		
Applicant's signature:		Date:
Mail to: PGCDPC Scholarship Committee P.O. Box 442325 Fort Washington, MD 20749		

Fort Washington, MD 20749 (240) 416-0435

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