



Greg Garrett Scholarship Award

Application Form

Part I. To be filled out by the Nominator.

Name of Person Submitting This Form: _____

Title: _____

Address: _____

City: _____ State/Province: _____ Zip/Postal Code: _____

Country: _____

Phone: _____ Fax: _____ Email: _____

Signature: _____ Date: _____

Check one of the following:

I am a PHTA member nominating myself.

I am nominating someone else.

Part II. Complete this section if you are nominating someone else.

Name of Individual Being Nominated: _____

Title: _____

Address: _____

City: _____ State/Province: _____ Zip/Postal Code: _____

Country: _____

Phone: _____ Fax: _____ Email: _____

Part III. Recommendation Forms.

List two individuals who will provide recommendation forms. You are responsible for sending the recommendation forms to them. Please instruct each individual to email their completed form to awards@phta.org by September 16, 2022.

Name: _____

Company: _____

Email: _____

Name: _____

Company: _____

Email: _____

Please email the application form to awards@phta.org by Friday, September 16, 2022.



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Part IV. Questions for Nominee.

Minimum: 250 words; Maximum: 500 words

1. How long has the nominee been a member of PHTA and how has it benefited the nominee personally and the nominee's company?

2. Describe the nominee's goals as they relate to education and/or certification.

3. If awarded, please describe how the Greg Garrett Scholarship Award would be spent.