Cornell University
Cooperative Extension
Columbia and Greene Counties

Education Center
479 Route 66
Hudson, NY 12534
518.828.3346
columbiagreene@cornell.edu
www.ccecolumbiagreene.org

Paul and Maria Morra Scholarship Trust

The purpose of this scholarship trust is to honor the lives of Paul and Maria Morra (trust benefactors) and their commitment to preserving the natural resources of our region.

Complete application packet must be received by April 1, 2017. Scholarship selection is not based solely on academic standing but greater emphasis is placed on the interest and motivation of the student to excel in their chosen field of study. Recipients are chosen by a selection committee whose recommendations are approved by the CCE Board of Directors. Their decision is final. The number of scholarships awarded is based on available funds with the minimum scholarship amount being $1,000. The scholarship check will be sent directly to the academic institution upon receipt of a copy of the student's tuition bill and college mailing address.

Eligibility:
- A current resident of Columbia County or Greene County
- Enrolled in an accredited academic institution including public colleges, private colleges, universities, community colleges and trade schools
- Pursuing further academic work beyond high school in the field of horticulture, agriculture, forestry or natural resources
- Excluded from applying are: past Morra Scholarship recipients; current Cornell Cooperative Extension of Columbia and Greene Counties Board members and staff, as well as their immediate family (significant other and children).

Application Packet must include:
- Attached cover sheet (your own word document)
- One 500 word essay (your own word document)
- Two letters of recommendation (references complete attached form and send directly to CCE)
- Most recent high school or college transcript
- Photo suitable to use for promotional press release (needed upon notification of award)

Send complete Application Packet to: Cornell Cooperative Extension of Columbia and Greene Counties
Linda Tripp, 4-H Youth Development Issue Leader
479 Rt. 66
Hudson, NY 12534

Questions? Contact: Linda Tripp
Lke2@cornell.edu
518-828-3346 x203

Building Strong and Vibrant New York Communities

Cornell Cooperative Extension in Columbia and Greene Counties provides equal program and employment opportunities.

Paul and Maria Morra Scholarship Trust Application Cover Sheet
(Please create as a word document)

1.   Name:
        Mailing Address:
        Phone Number:
        Email Address:
        Parent(s) Name(s) and Where They Live:

2.   High Schools/Colleges Attended:

Name of School(s)	Dates	Graduation Date
a.		
b.		
c.		

3.   List up to three schools/programs in order of preference that you plan/want to attend. Include city, state, major course of study, and note if accepted as a student:
        a.
        b.
        c.

4.   List your most significant involvement in work, community programs, volunteer activities, and awards. Please include up to twenty, with dates for each.
        a.
        b.
        c.
        etc.

5.   Personal Essay:
        Attach a typed and double spaced essay, not more than 500 words in length, on the following topic –
        "Describe your plans for the future and what experiences have influenced your decision to pursue a career in the field of horticulture, agriculture, forestry or natural resources".

6.   Two Recommendation:
        • one from a teacher/guidance counselor who can speak to your academic success
        • one from a clergy, employer or person other than family members, who is familiar with your skills and abilities
        Please give the following reference form along with an envelope addressed to Cornell Cooperative Extension of Columbia and Greene Counties, Linda Tripp, 479 Rt. 66, Hudson, NY 12534 to those completing the recommendation form so references can send their recommendation directly to CCE.

7.   Certification: I certify that the information contained herein is correct and truthfully reflects my personal and academic background and records. I agree that, if any information contained herein is found to be falsified in any way, my application will automatically become null and void.

Signature of Applicant_____ Date: _____

Mail completed application packet to:
Cornell Cooperative Extension of Columbia and Greene Counties, Linda Tripp, 479 Rt. 66, Hudson, NY 12534
OR, email to: lke2@cornell.edu

Paul and Maria Morra Scholarship Trust Reference Form

I wish to endorse _____ as an applicant for Paul and Maria Morra Scholarship Trust.

I have known the applicant for _____ years.

My relationship to the applicants is/was: _____.

Please write a short paragraph supporting your endorsement of the applicant. Mention traits, experiences or characteristics you are familiar with. You may also share information about goals, behaviors or relationships that support the candidate's application for this scholarship. If possible, include your thoughts and knowledge of this applicant as related to the scholarship's field of study in agriculture, forestry, horticulture or natural resources.

Date:

Signature:

Name (printed):

Title, if any:

Please return this reference form by April 1, 2017 in a sealed envelope with your name written across the seal, to Linda Tripp, CCE, 479 Rt. 66, Hudson, NY 12534.

This page is intentionally left blank.

Paul and Maria Morra Scholarship Trust Reference Form

I wish to endorse _____ as an applicant for the Paul and Maria Morra Scholarship Trust.

I have known the applicant for _____ years.

My relationship to the applicants is/was: _____.

Please write a short paragraph supporting your endorsement of the applicant. Mention traits, experiences or characteristics you are familiar with. You may also share information about goals, behaviors or relationships that support the candidate's application for this scholarship. If possible, include your thoughts and knowledge of this applicant as related to the scholarship's field of study in agriculture, forestry, horticulture or natural resources.

Date:

Signature:

Name (printed):

Title, if any:

Please return this reference form by April 1, 2017 in a sealed envelope with your name written across the seal, to Linda Tripp, CCE, 479 Rt. 66, Hudson, NY 12534.

This page is intentionally left blank.