



## 2019 CTCR&D SCHOLARSHIP PROGRAM

*2 Scholarships Available*

### GUIDELINES

Connecticut Resource Conservation and Development, Inc. (CTRC&D), a 501(c)(3) statewide charitable organization, announces the 2019 Scholarship Award Program. Under the program, (2) \$500 scholarships will be awarded to high school seniors or college students attending school in Connecticut. CTCR&D employees, Council Members, and their families are not eligible to apply.

#### Available Scholarships:

**(1) Norma O'Leary Agriculture Scholarship** - \$500 for students pursuing a post-secondary technical school or college career in agriculture.

**(1) Linda B. Krause Conservation Scholarship** - \$500 for students pursuing a post-secondary technical school or college career in conservation.

#### Program Guidelines & Priorities:

\* Seeking graduating high school seniors pursuing a career in agriculture or conservation, and college students currently matriculated in an agriculture or conservation degree program.

\* Applicants must have a minimum GPA of 2.5 and plan to attend a 2- or 4-year college or technical school.

\* Scholarship funds will be paid ***in December 2019 or January 2020 for the second semester of the student's year*** to the college or technical school upon receipt of an invoice for second semester tuition and fees, student ID number, and college information.

\* High School applicants must have the endorsement of their Guidance Counselor on their application attesting they are a qualified fit for this scholarship program. ***CTRC&D strongly suggests that each high school present this opportunity to the strongest applicants who match this program's guidelines.*** Application deadline is ***May 3, 2019 by 4:00 p.m.*** Late applications will not be accepted.

Applications may be downloaded from the CTCR&D website at [ctrcd.org](http://ctrcd.org).

Mail one copy of a completed typed application package to:  
*This includes application with signoff by Guidance Department,  
essay, resume, and school transcript.*

CTRC&D Scholarship Committee  
P.O. Box 70  
Haddam, CT 06438

For email submissions and questions: [aperes@ctrcd.org](mailto:aperes@ctrcd.org)

The applications will be reviewed, and recipients selected by a committee consisting of CTCR&D Council Members volunteers. Recipients will be notified via phone and email by May 24<sup>th</sup>. The scholarships will be awarded at the CTCR&D Annual Meeting in June 2019. Scholarship recipients will be notified of the Annual Meeting date and location, and are encouraged to attend.

*CTRC&D is an equal opportunity employer and provider.*



## 2019 SCHOLARSHIP APPLICATION

<i>Please write legibly.</i>	
1.	Last Name: _____ First Name: _____
2.	Mailing Address Street: _____  City: _____ State: _____ Zip: _____
3.	Daytime Telephone Number: (     ) _____  Email Address: _____
4.	Date of Birth:    Month                      Day                      Year                      Gender: _____
5.	Cumulative Grade Point Average (GPA): _____ (On a 4.0 scale) <i>Attach proof of GPA. Your most recent school transcript is required.</i>
6.	Are you the first person in your family to attend college: YES ___ NO ___
7.	Name and location of High School, Technical School, or College attending: _____
8.	<p><b>(Please attach a separate sheet as needed)</b></p> <p>A. List any academic honors, awards, and membership activities while in high school and college:</p> <p style="padding-left: 40px;">_____</p> <p>B. List your hobbies, outside interests, extracurricular activities, and school related volunteer activities:</p> <p style="padding-left: 40px;">_____</p> <p>C. List your non-school sponsored volunteer activities in the community:</p> <p style="padding-left: 40px;">_____</p>
9.	<p>A. For High School students, if you have decided on what college you will attend, please list school name: _____</p> <p>B. If not, list your top 3 college choices: _____</p>
10.	Is your parent or legal guardian an employee or council member of CTRC&D? Yes _____ No _____
11.	<p>Name &amp; address of parent(s) or legal guardian(s): <i>(Include address if different than your own listed in Q #2)</i></p> <p>Name(s): _____</p> <p>Street: _____</p> <p>City: _____ State: _____ Zip: _____</p> <p>Home phone of parents or legal guardians: _____ Work phone: _____</p>
12.	<p><b>On a separate sheet, please write an essay (no more than 500 words) answering the questions below:</b></p> <p>Describe why you are pursuing a career in agriculture or conservation. What motivated you to choose this career? Discuss in your essay about any challenges or obstacles you have dealt with and overcome in life and how this will help you succeed in college and beyond.</p>



## STATEMENT OF ACCURACY FOR STUDENTS

I hereby affirm that all the above stated information provided by me is true and correct to the best of my knowledge. I also consent that if chosen as a scholarship winner my picture may be taken and used to promote the CTCRC&D's scholarship program. (Winner may waive photo due to unusual or compelling circumstances.)

I hereby understand that if chosen as a scholarship winner, according to CTCRC&D Scholarship policy, I must be present at any potential awards ceremony during the RC&D Annual Meeting in June 2019 to receive my scholarship award.

I hereby understand that if chosen as a scholarship winner, according to CTCRC&D Scholarship policy, it is my responsibility to remit to CTCRC&D, the appropriate information for my scholarship to be paid directly to my educational institution for my second semester in December 2019/January 2020.

I hereby understand I will not submit this application without all required attachments and supporting information. Incomplete applications or applications that do not meet eligibility criteria will not be considered for this scholarship.

**Signature of Scholarship Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*For High School Students*

## STATEMENT OF SUPPORT BY GUIDANCE COUNSELOR

I hereby affirm that this application meets the criteria set forth by this scholarship program and that I support this application to CTCRC&D.

Name of Guidance Counselor: \_\_\_\_\_

High School: \_\_\_\_\_

Contact Information (email and phone): \_\_\_\_\_

**Signature of Guidance Counselor:** \_\_\_\_\_ **Date:** \_\_\_\_\_



**Checklist:**

- Application
- Essay
- Resume/Activity Sheet
- Guidance Counselor Signature
- School Transcript

**MAIL/EMAIL COMPLETE APPLICATION PACKAGE TO CTRC&D AT:**

**CTRC&D Scholarship Committee**

**P.O. Box 70**

**Haddam, CT 06438**

**aperes@ctrctd.org**

**REMINDER:**

**The deadline for this application to be received by the CTRC&D Office is:**

**May 3, 2019 by 4:00 p.m.**

**NO EXCEPTIONS!**