



SULLIVAN COUNTY TRAIL ASSOCIATION  
P. O. BOX 414  
NEVERSINK, N.Y. 12765

2017-2018 SCHOLARSHIP APPLICATION

NAME: \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_

PARENTS/GUARDIANS: \_\_\_\_\_

NAME OF HIGH SCHOOL: \_\_\_\_\_

PLEASE LIST YOUR SCHOOL ACTIVITIES: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

DESCRIBE ANY COMMUNITY ACTIVITIES IN WHICH YOU HAVE BEEN INVOLVED:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

HAVE YOU BEEN EMPLOYED: \_\_\_\_\_ IF YES, WHERE: \_\_\_\_\_

DUTIES THERE: \_\_\_\_\_

COLLEGE OR UNIVERSITY YOU PLAN TO ATTEND: \_\_\_\_\_

\_\_\_\_\_  
HAVE YOU BEEN ACCEPTED? \_\_\_\_\_

NAME OF YOUR MAJOR (MUST BE A FIELD AS NOTED UNDER QUALIFICATIONS):

\_\_\_\_\_

I. ON A SEPARATE SHEET OF PAPER, PLEASE TELL US, IN ABOUT 100 WORDS, ABOUT YOURSELF, YOUR LIFE GOAL, YOUR VOCATION, AND THE REASONS WHY YOU HAVE DECIDED ON THE ABOVE NAMED MAJOR AND THE COLLEGE OR UNIVERSITY.

II. PLEASE SUBMIT THREE (3) LETTERS OF RECOMMENDATION FROM EITHER:

- A. GUIDANCE COUNSELOR OR TEACHER
- B. YOUR CHURCH OR MINISTER
- C. YOUR EMPLOYER
- D. A SCOUTMASTER OR SUPERVISOR OF ANY EXTRACURRICULAR ACTIVITIES.

III. A COPY OF YOUR GRADES.

SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_

TO QUALIFY, THE APPLICANT MUST BE A SENIOR IN A SULLIVAN COUNTY HIGH SCHOOL, **OR** WHOSE PARENTS/GUARDIANS ARE MEMBERS IN GOOD STANDING OF THE SULLIVAN COUNTY TRAIL ASSOCIATION, **AND** WHO PLANS ON **MAJORING IN AN ENVIRONMENTAL FIELD** SUCH AS: FORESTRY PRESERVATION, WILDLIFE MANAGEMENT, ENVIRONMENTAL BIOLOGY, SOIL & WATER CONSERVATION, ETC.

THE APPLICATION MUST BE RETURNED TO THE SULLIVAN COUNTY TRAIL ASSOCIATION AT P. O. BOX 414, NEVERSINK, N. Y. 12765, BEFORE MAY FIRST OF THE CURRENT YEAR.

THE SCHOLARSHIP MONIES WILL BE DISBURSED TO THE STUDENT UPON OUR RECEIPT OF A COPY OF THEIR FIRST COLLEGE SEMESTER GRADE TRANSCRIPTS.