Margaret Raley New York State Migrant Student Scholarship Award

In honor of Margaret Raley for her dedicated commitment to migrant farmworker families, this Scholarship will recognize a New York State migrant student who desires to achieve personal and career goals by furthering his/her education.

GUIDELINES

Eligibility – Nominees for a Margaret Raley New York State Migrant Student Scholarship Award must:

1. be a New York State resident or have a history of migration to New York State,
2. be migrant education eligible,
3. have senior status in high school at the time of the award, and
4. have plans to attend a post-secondary institution or other advanced training.

Application Process – Each applicant must submit:

1. a completed application,
2. at least one (1) letter of reference from a school or community/educational agency representative with personal knowledge of the applicant's character and commitment to pursuing further education,
3. a copy of applicant’s current Migrant Education Program Certificate of Eligibility (COE), and
4. a personal Goal Statement (at least 250 words) describing his/her background and interest in further education.

Selection Criteria – The criteria for selection will include, but not be limited to:

- demonstrating commitment to educational goals,
- participating in school/MEOP related activities,
- participating in community and/or non-school activities,
- demonstrating good citizenship qualities,
- presenting evidence of high mobility (inter or intrastate), and
- overcoming unusual obstacles to success.

Presentation of Award – The Margaret Raley New York State Migrant Student Scholarship Award will be announced at the Migrant Education Outreach Program (MEOP) Spring Consortium. The financial award will be provided to the winner upon submission of proof of acceptance or enrollment at an accredited public or private college or trade school.

The application deadline is April 1 of each year and must be postmarked by that date.

Submit completed application packets to:

Margaret Raley New York State Migrant Student Scholarship
Geneseo Migrant Center
3 Mt. Morris-Leicester Road
Leicester, NY 14481
Margaret Raley New York State Migrant Student Scholarship Award

APPLICATION

Please provide the following information. (Use extra sheets as needed.)

I. PERSONAL INFORMATION

Name: __________________________________________ (____)__________________
   Last   First       Middle Initial         Home Phone

E-mail Address: __________________________________ (____)__________________
   Cell Phone

Birth Date: __________________________________    Sex:  F _____ M _____
   Month   Day   Year

Mailing Address: _________________________________________________________
   _________________________________________________________

Home Address: __________________________________________________________
   (if different from mailing address)

Parents' Names:    Father_________________________________________________
                   Mother________________________________________________

Occupations: ____________________________________________________________

Number of brothers/sisters living at home: ________________________________

II. MIGRANT HISTORY

Date of most recent move: _______________________________________________

Schools attended: ______________________________________________________
   (Give city, state, & dates)
   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________

(next)
III. EDUCATIONAL DATA

School presently attending: _________________________________________________

Address: ________________________________________________________________

Phone: _________________________________________________________________

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<th>Area Code</th>
<th>Number</th>
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Grade: ____________      Grade Point Average: ____________

Anticipated date of graduation: ______________________________________________

Educational Goal: ___________________________________________________________

School Contact: ____________________________________________________________

IV. HIGH SCHOOL ACCOMPLISHMENTS

A. Academic Achievements (Awards, Honors, Scholarships)

B. Extracurricular Activities (List/Describe)

___________________________________________  _________________
Signature of Applicant       Date

___________________________________________  _________________
Signature of MEOP Representative       Date

Application Checklist:

___ Reference letter   ___ Goal Statement   ___ Migrant COE   ___ Application Form