

## Scholarship Application

To Include: General Memorial – Don Thompson – Jon Oostermeyer – Youth Nationals

Mail To: Arabian Horse Foundation OR Arabian Horse Foundation

ATTN: Scholarships
10805 E. Bethany Dr.

Aurora, CO 80014

ATTN: Scholarship
1024 K Street
Lincoln, NE 68508

### **APPLICATION DEADLINE: April 1st**

Scholarships are awarded on the basis of financial need, academic ability, leadership, and equine involvement. Scholarships may be used for undergraduate or graduate studies at an accredited college or university. Proof of enrollment as a full-time student is required. (without the following your application will be incomplete)

Please enclose the following with completed application:

- 1. Certified copy of most recent transcripts (showing GPA)
- 2. Copy of ACT and/or SAT score(s) or Similar Testing
- 3. Two (2) letters of recommendation
- 4. Photo (optional)

Applicant Information: Please Print or Type

|                  |                      | Region:          | Club:          |             |  |
|------------------|----------------------|------------------|----------------|-------------|--|
| Name:            |                      |                  |                |             |  |
| Address:         |                      | City:            | State/Prov.:   | Zip:        |  |
| Telephone:       |                      | _ Soc. Security: | Date of Birth: |             |  |
| High School:     |                      | City:            | State:         | Grad. Year: |  |
| University (atte | ending or planni     | ng to attend):   |                |             |  |
| Location:        | Expected Grad. Year: |                  | Tuition:       |             |  |
| Major:           | Career Goal:         |                  |                |             |  |
| ACT:             | SAT:                 | High School GF   | PA: Colleg     | e GPA:      |  |
| Class Rank:      |                      | Class Size:      |                |             |  |



# Scholarship Application

| Extracurricular Activities  Please print, complete and mail. Please attach your responses.  |  |  |  |  |
|---|--|--|--|--|
| List honors or academic awards you have received:   |  |  |  |  |
|   |  |  |  |  |
| List extracurricular activities, especially those in which you have held offices or other leadership roles, and describe how they have influenced you and others: |  |  |  |  |
|   |  |  |  |  |
| Discuss your career goal:   |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
| Describe your equine involvement:   |  |  |  |  |



## Scholarship Application

#### **Financial Information**

Please comment on your financial need and any special or extenuating circumstances:

| Please provide appropriate information:   |                       |                           |  |  |  |  |
|---|-----------------------|---------------------------|--|--|--|--|
| Estimated annual cost of education: \$  |                       |                           |  |  |  |  |
| Other scholarships (please list): \$  |                       |                           |  |  |  |  |
|   |                       |                           |  |  |  |  |
| Financial Support by applicant: \$  |                       |                           |  |  |  |  |
| Student Loans (total value of all): \$  |                       |                           |  |  |  |  |
| Financial Support (parental or other, please explain): \$                       |                       |                           |  |  |  |  |
| Remaining financial support needed: \$  |                       |                           |  |  |  |  |
| Father's Name:  | Occupation: _         |                           |  |  |  |  |
| Mother's Name:  |                       |                           |  |  |  |  |
| Parent's Address:   |                       |                           |  |  |  |  |
| Parents adjusted gross income from most recent tax statement (1040 Line 35): \$ |                       |                           |  |  |  |  |
| Total number of siblings (not including applicant): _                           |                       |                           |  |  |  |  |
| Siblings in: Elementary School or younger                                       | High School           | College                   |  |  |  |  |
| Guardian Signature:   |                       | Date:                     |  |  |  |  |
| All information will be held in strictest confidence b                          | y the scholarship cor | nmittee. All applications |  |  |  |  |

All information will be held in strictest confidence by the scholarship committee. All applications and supporting materials become the property of the Arabian Horse Foundation. All portions of this application must be completed for consideration. If you are over 21 years of age or married, you do not need to provide parental information unless they are contribution financially to your education.