

Youth Foundation AHA Region 9, Inc.
Scholarship Program Application

Description: Each scholarship to an accredited trade school, junior college or university shall be awarded annually by the Youth Foundation to a qualified applicant and distributed over a period of no more than four years, as more specifically determined below:

- The amount of funds available for scholarship awards in any given year will be determined by the Youth Foundation AHA Region 9, Inc Board of Directors, as will the number and amount of scholarships to be awarded.
- The scholarships will be designated for tuition.
- Applicants receiving a scholarship will be notified upon selection, with the actual award taking place at the next occurring Region 9 Championship Show.
- The academic standing of each scholarship recipient will be reviewed annually by the Foundation Board prior to consideration; recipient must remain in good standing and in the upper 50% of his/her class.
- If a student is dropped from the program for any reason, the Youth Foundation reserves the sole right to review the student's application for reinstatement, as all ruling of the Youth Foundation shall be final.

ALL AWARDED FUNDS WILL BE PAID DIRECTLY TO THE COLLEGE OR SCHOOL OF CHOICE. NO PAYMENTS WILL BE MADE DIRECTLY TO THE AWARD RECIPIENT.

Eligibility:

- Applicant must be a resident of AHA Region 9 (Arkansas, Louisiana, Oklahoma and Texas) and a member of an AHA affiliated club within Region 9.
- Applicant must be either (a) a graduating high school senior or (b) a high school graduate who has been accepted by a two- or four-year college, university or school.
- Applicant must be less than 21 years of age at the time of initial application.
- Applicant's high school grade point average must place him/her in the upper 50% of applicant's senior class.

Application: Applicant must submit a one page letter of request and intent, including a brief account of horse related activities and achievements.

Applicant must submit at least four letters of recommendation, at least one being from each of the following:

- A horseman or horsewoman, whose letter includes comments on the equine abilities and experience of the applicant.
- A teacher or advisor, whose letter indicated the applicant's attitude and quality of academic work.
- A local Region 9 club or an individual member of that club.

In addition, applicant must submit the following:

- A current head and shoulders photograph, measuring 3 by 5 inches.
- SAT and/or ACT scores and complete high school transcript.
- Copies of the immediate past year's federal income tax returns of applicant and of applicant's parent(s) or guardian, or any other documentation the Youth Foundation may deem necessary to determine the applicant's financial need.

*The Youth Foundation reserves the right to contact all references. **No applicant will be considered unless all requirements are met.** Applicants receiving a scholarship must provide any other documentation as requested by the Youth Foundation Board of Directors. Selection:*

Selection is based upon the following:

- Financial need
- Academic records, including attendance
- Equine background
- Leadership
- Sense of direction in furthering education

Submit completed application and all supporting documentation to:

Sandy Bentley
P.O. Box 505
Tioga, TX 76271
(214) 499-1737

I have read, understand and agree to abide by the rules stated herein.

Applicant Signature _____ Date _____
Parent/Guardian Signature _____ Date _____

Application Submission Deadline: February 28th

Youth Foundation AHA Region 9, Inc.
Scholarship Program Application

Name: (Type or print name in full)

Father's occupation: _____

Home Address: _____
Street or Rural Box

Mother's Occupation: _____

Number of siblings: _____

City: _____ State: _____ Zip: _____

Number of siblings currently attending a college or university: _____

Age: _____ DOB: _____

Number of siblings who will be attending college during the coming year:

Telephone: _____

E-mail: _____

Field in which you plan to major or are majoring in: _____

AHA Number: _____

AHA Club Name: _____

Please include on a separate sheet(s):

Name and address of High School you are attending or from which you graduated:

- High school transcripts
- Listing of any scholarships you have previously received
- List of any scholarships for which you have applied
- Record of Club Offices held, special activities, etc.
- Complete listing of all schools you have attended.
- All other documents and letters as required in the Scholarship Criteria Form.
- Statement indicating reasons for study in the field you have chosen.

Date of graduation: _____

Name and address of Parent(s)/Guardian(s):

Telephone: _____

ATTACH REQUIRED PHOTOGRAPH HERE:

I have read, understand and agree to abide by the rules stated herein.

Applicant Signature _____ Date _____

Parent/Guardian Signature _____ Date _____

Application Submission Deadline: February 28th