

# Area VI Shetland Pony & Miniature Horse Breeders Association Youth Scholarship Application

The Area VI Shetland Pony & Miniature Horse Breeders Association Scholarship encourages further education of young men and women by awarding annual scholarships. These scholarships are open to any Area VI SP&MHBA member or family member of such who meets the requirements and who has been actively involved in the Association.

Scholarships of \$250.00 per academic year are available for students attending Vocational Technical/Trade School, or a 2- or 4-year College/University. Applicants must have a cumulative "B" grade-point average or its equivalent (3.0) adjusted to a 4-point scale. Scholarship may be applied for more than once. If applying within two years of high school graduation and have been attending college, applicant's cumulative college grade point average (GPA) must be 3.0 or higher to qualify.

- 1. Applicant or family member must be an Area VI SP&MHBA member in good standing at the time of each application.
- 2. Must be a high school graduate or equivalent and have never been married.
- 3. Applicants, regardless of age, must apply for the scholarship within two years from the date of high school graduation or date of equivalency. However, no scholarship will be retroactive. If attending college, the applicant must submit a sealed transcript and cumulative GPA must be a 3.0 or higher.
- 4. This application must be postmarked no later than February 1 of the year in which the applicant wishes to receive the scholarship. Faxes and emails will NOT be accepted.
- 5. All applications must be accompanied by a recent portrait photograph of the applicant ONLY—no horses please. The photograph should be approximately 3 inches by 5 inches.
- 6. Scholarship funds will be paid directly to the institution and will not be issued to the student or their family. Funds are to be used for tuition, books and lab fees.
- 7. All applications and supporting materials become the property of Area VI SP&MHBA and cannot be returned.
- 8. All information will be held in strictest confidence by the Review Committee.

## Scholarship Application

Applicant Name	Date of Birth
Permanent Address City, State and Zip code	
Telephone Number	Email Address
Name of College/University and address	Enrollment Date
Major Area of Study	
What is Your Career Goal	
How long will you be in school to achieve this	goal?
Please describe, on a separate page, in 150 career goals.	words or less your scholastic and
Your Application completed on official form Proof of Acceptance/Enrollment: Must pro- your School of choice, not a copy.  A sealed copy of your most recent official a Three (3) letters of recommendation from p to be confidential and must be mailed sep recommendation writers. The letters need application year.  Goal Essay 150 words or less Applicant Essay 200 to 400 words One(1) high quality photo of the applicant  Part I: School Information  Name of School/College/University you plan to a	vide an official letter of acceptance from academic transcript. Decople other than relatives. Letters need parate from the application by the to be postmarked by <b>February 1</b> of the
Name of School/College/University you plan to a	attena.
School Address City State Zip code	
Current Financial Aid Office Contact Name Phon	ne Number Email address
Financial Aid Office Address City	State Zip code
Applicant's School Address (if available)	City State Zip code
Anticipated Major/Area of Study:	

### Part II: Scholastic Aptitude

Name of High	School		Location	Dates Attended
Name of High School			Location	Dates Attended
Name of High High School C		l to a 4-point scale	Location :	Dates Attended
Name of Colle	ge		Location	Dates Attended
accompany th	de transcrip iis applicatio	t from your most re		ester or quarter must c <b>opy</b> directly from your
Part III: Wo		<b>y</b> your work history a	nd/or positions yo	u have held.
Employer:			Position/Title	:
Start Date:	End:	Job Duties:	, 	:
Employer:			Position/Title	:
Start Date:	End:	Job Duties:		
Employer:			Position/Title	;
Start Date:	End:	Job Duties:		
Part IV: Ex	tracurricu	lar Non-Equine	Activities	
List the name Club Name	and type of o		you belong to outs ub Type	side of equine-related Years Involved
List your scho	lastic honors	s/achievements/awa	ards:	

List your school organizations, acti	ivities and any position	s held:	
List your hobbies, interests, and ci	vic actives:		
Part V: Extracurricular Equ List the name and type of equine re include 4H, Pony Club, Rodeo, FFA	elated clubs/organizati	•	elong to. These may
Club Name	Club Type	Years	s Involved
List 4H or FFA projects you have e	nrolled in:	-	
List outstanding awards and achie organizations:	vements in 4H, FFA, Po	ony Club o	r similar
Part VI: Involvement in Inc	1110170		
Do you own an ASPC/AMHR?	•	y? Yes	No
Do you own other equine?	Does your family	y? Yes	No
List Horse Clubs you belong to Club		ears as a	member
How long have you been involved v Other?			Trail Riding?

List your activities/experiences in riding/trail/showing/racing/dressage/4H/o	the -
List major horse related awards you have received	_
	- - -
List any other notable activities or awards not previously mentioned	

#### Part VII: Applicant Essay

On a separate sheet, in a 200- to 400-word hand written essay (grammar and neatness will be judged) summarize your thoughts and feelings on the following:

- 1. What have your experiences with horses meant to you?
- 2. Why do you desire to continue your education?
- 3. What personal qualities do you possess that you believe qualify you to receive this scholarship?
- 4. What circumstances do you have that demonstrate financial need?
- 5. How will receiving this scholarship enhance your education experiences?

#### Part VIII: Letters of Recommendation

Three Letter of recommendation are required (your application will be disqualified if you do not have three (3) letters). These letters must be mailed separately from the application and be sent directly to the Area VI SP&MHBA by the person writing the letter.

Reference 1	Address	City, State, Zip code	Phone
Reference 2	Address	City, State, Zip code	Phone
Reference 3	Address	City, State, Zip code	Phone

The letters may be from instructors, coaches, teachers, colleagues, youth leaders or other qualified persons. Letters cannot be written by your family members. It is suggested that you provide an envelope pre-addressed to the Area VI SP&MHBA Scholarship. It is suggested that you follow up with those writing letters to ensure that their letters are mailed and postmarked before the **February 1** deadline.

#### Part IX: Applicant Signature and Acknowledgment

I hereby acknowledge the information contained in this application to be true to the best of my knowledge. I understand that fraudulent information may result in disqualification of any scholarship money awarded, and/or may disqualify me from present and future consideration for scholarship funding from the Area VI SP&MHBA.

Applicant Signature	Date	
Applicant Parent/Legal Guardian's Signature	Date	

# **SCHOLARSHIP DEADLINE:** February 1 NO EXCEPTIONS

Mail Application To: Area VI SP&MHBA Scholarship, 911 N Tressin Rd, Salina, KS 67401

The Area VI SP&MHBA reserves the right to vary the number of and amount of scholarships awarded based upon the quality of the entries as scored by the judges and the funds available.