Continuing Education Applicants OFFICIAL APPLICATION FOR IDAHO HORSE COUNCIL EDUCATIONAL SCHOLARSHIP 16114 IDAHO CENTER BOULEVARD #5, NAMPA, ID 83687 (208) 465-5477

This application **must be completed and received by the Idaho Horse Council** office by **April 15, 2024** in order to be considered by the Scholarship Selection Committee. Applications received later than the above date will **NOT** be reviewed. **You will be notified sometime after May 3, 2024 if you are a scholarship winner.** Scholarship awards will be given directly to the institution that the recipient will be attending in the following manner: A minimum of one thousand five hundred dollars will be sent directly to the school upon receipt of acceptance. Scholarship awards will only be given in the year they are awarded for.

Applicant must be involved with equine and/or the equine industry. To be eligible, the applicant must be a legal resident of the State of Idaho.

PART I - GENERAL INFORMATION

| Applicant's Full Name | | | |
|---|----------------------------------|---------------------|------------|
| Permanent Address | City | State | Zip |
| Home Phone: () | geBirth Date | | |
| (Parent information is not require | | | |
| (college/university studies, tecl | hnical and vocational schools | s, and certified | programs.) |
| Father's Name | Occupation | | |
| Address | City | State | Zip |
| Home Phone (| Estimated gross incom | ie per year | |
| Number of dependent children in he | ousehold | | |
| Number of dependent children in co | | | |
| (You may write "same" in any spaces below | v for answers that are redundant | t within a single f | family.) |
| Mother's Name | Occupation_ | | |
| Address | City | State | _Zip |
| Home Phone () | Estimated gross incon | ne per year | |
| Number of dependent children in he | ousehold | | |
| Number of dependent children in c | | | |

PART II - SCHOOL INFORMATION

| Current school attending | | | | |
|---------------------------------|--------|-----|----------|--|
| City | _State | Zip | Phone () | |
| School contact person and title | | - | | |

Student Status: (circle appropriate standing) freshman sophomore junior senior Attach personal/school resume that includes the following:

- 1. School organizations or clubs in which you participate
- 2. Special achievements
- 3. Involvement with horses and/or the horse industry
- 4. Scholastic achievements/awards/activities

PART III - SCHOLASTIC APTITUDE

Provide official transcript showing your GPA.

PART IV - APPLICANT ESSAY (300 – 500 words)

Attach to the application in essay form, the following, using complete sentences.

- 1. Why do you desire to continue your education?
- 2. Describe personal qualities that you believe qualify you to receive a scholarship.
- 3. Indicate what you believe your primary interest/course of college study will be & why.
- 4. Relate your work experience and/or general work background.
- 5. Discuss your experience or background involving equine activities.
- 6. Indicate any circumstances regarding financial need.

PART V - ADDITIONAL REQUIREMENTS

- Scholarship selection will be based upon scholastic aptitude, leadership potential, sportsmanship, and community/civic responsibility. Further, the recipient of this scholarship will have demonstrated their involvement with equine and/or the equine industry (for example, 4H programs, FFA, Rodeo Clubs/Associations, Pony Club, Shows, trail riding or any other organized or individual participation involving equine).
- 2. Two letters (from individuals not related to applicant) of personal recommendation regarding the applicant's character, scholastic ability, school achievement/ involvement and community/civic involvement. Letters must be on letterhead stationery, signed, and sealed in individual envelopes addressed to the IHC. Copies of email correspondence will not be accepted as a reference.
- 3. Photo of applicant: 8" by 10" black & white portrait, no copies, no scanned photos. Pictures become the property of the IHC and will not be returned. Photos of recipients will be posted on the IHC website.
- 4. Proof of enrollment and standing as a freshman or entry level at the beginning of the upcoming academic year. This is a letter of acceptance from the institution you are enrolled in. Forms from other schools you have considered ARE NOT to be included. Institution you will be attending this fall:

| Name | | | | |
|---|-------|--------|-----|--|
| Address | _City | _State | Zip | |
| School contact person/title/phone | | | | |
| School Scholarship office contact person and phone number | | | | |

PART VI - 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 future consideration for scholarship funding from the Idaho Horse Council.

| Applicant's Signature | Date |
|-------------------------------------|------|
| Parent or legal Guardian Signature_ | Date |

(Parent or Guardian signature not required of those having one or more years of continuing education) CHECK LIST

This page must be returned with your application. Please check off everything you completed before you return your application.

____Mail application to completed on official Idaho Horse Council form must be received by the IHC's office no later than April 15, 2024. Any application received after that date will not be considered.

_____Information regarding parents or guardian must be entered, if appropriate (Part I).

____Personal resume (Part II)

Certified school transcript: no copies, no scanned documents. (Part III.1.)

_____300-500-word ESSAY. (Part IV)

_____Two letters of recommendation (Part V.2.)

_____ Photo of applicant: 8" by 10" black & white portrait (Part V.3.)

Proof of enrollment (letter of acceptance). (Part V.4)

- Information from the institution you will be attending name of the person who will be acknowledging your enrollment at the institution, their address, and phone number. Name of school scholarship office contact person and telephone number. (Part V.4.)
 - _____Signatures of parents or guardian (as appropriate).