

**QCABHA HORSE SCHOLARSHIP
APPLICATION FORM**

Please type or print legibly.

Name _____

Current Address _____

City/State/Zip _____

Home phone number () - Social Security # - -

Number of years you have been a member of the QCABHA. _____

Educational Institution Information (Name, address, phone, etc.)

Applications are **due December 5, 2009** to: ***QCABHA Scholarship Committee***

Attn: Beth Wooldridge

PO Box 375

Milan, IL 61264

Email: Luke9816@att.net

If you need more room to answer the questions, then please add more paper. However do not use more than half of sheet of paper per question.

1. List your club-related activities and offices held. Include the year(s) of participation in each activity:

2. List your five most important accomplishments.

1.

2.

3.

4.

5.

3. What is your educational and/or career plan?

4. What is your financial need?