

WNYQHCI Scholarship Application 2019

General Information:

1. The Western New York Quarter Horse Club, Inc. (WNYQHCI) will award one scholarship in the amount of \$1,000, or Two (2) \$500 scholarships.
2. The Western New York Quarter Horse Club, Inc. Scholarship program is open to any WNYQHCI member who will be attending an accredited college or university, 9 credit hours or more, and is 25 years or younger.
3. Application for a scholarship must be made within one year of graduation from high school, 1st, 2nd and 3rd year of college.
4. Applicants must have an accumulative grade point average of 3.0 (B) on a four point scale.
5. This application, transcripts and references must be post marked no later than June 1, 2019. Faxes will not be accepted. Recipient will be announced at the Candy Apple Show.
6. Scholarship funds will be paid directly to the institution and will not be issued to the student or their family. If awarded a WNYQHCI Scholarship, it is the responsibility of the recipient to notify the WNYQHCI Scholarship Committee of the college or university they will be attending and the necessary information for contact with the financial aid department.
7. All applications and supporting material become the property of WNYQHCI and will not be returned.
8. All blanks on the application must be filled. If a blank is not applicable, please mark as N/A. An application that is not completely filled out will be returned. (Application may be resubmitted if postmark deadline is met.)
9. Scholarship Applications will be sent to:
WNYQHCI/Scholarship
Amy Hanssen
9063 Chestnut Ridge Road
Middleport, N.Y. 14105
10. For further information contact WNYQHCI Scholarship Co-chairs
Amy Hanssen - 716-735-7988, Cheryl Bish – 716-439-4499,
Karen Randall - 716 439-1865, Tracy Kalinski – 716-216-4129

Applicant's Personal Information

Name: _____ Date of Birth: _____

WNYQHCI membership date: _____

Phone: () _____ Email: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Family Information:

Fathers Name: _ _____

WNYQHCI membership date: _____

Phone: () _____ Email: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Mothers Name: _____

WNYQHCI membership date: _____

Phone: () _____ Email: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Guardian or Others Name: _____

WNYQHCI membership date: _____

Phone: () _____ Email: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Category I - 25% of total application score

Indicate Career Goal

How long will you be in school to achieve this goal? _____ years
Please include a separate, 500 word or less explanation of your educational plans and goals.

Scholastic Record

Name of School _____
Location _____
Dates Attended _____
High School GPA adjusted to 4-point scale _____ (Attach high school transcripts)
Photocopy acceptable
Class Rank _____ of _____

College Entrance Exam Score:

ACT SAT scores:

ACT _____ SAT _____

Percentile:

Names of college(s) to which you are applying in order of preference:

1. _____

2. _____

3. _____

(Attach additional page if needed)

Category II - 25% of total application score

Horse Activities:

Horse Club Memberships: _____ Year(s) _____
_____ Year(s) _____
_____ Year(s) _____
_____ Year(s) _____
_____ Year(s) _____

Regional/State/
Organization Activities:

_____ Year(s) _____
_____ Year(s) _____
_____ Year(s) _____
_____ Year(s) _____
_____ Year(s) _____
_____ Year(s) _____

WNYQHCI

Membership: _____ Year(s) _____
Activities: _____ Year(s) _____
_____ Year(s) _____

Awards :

Name of Horse: _____ Year of Competition: _____
Awards: _____

Name of Horse: _____ Year of Competition: _____
Awards : _____

Name of Horse: _____ Year of Competition: _____
Awards : _____

Name of Horse: _____ Year of Competition: _____
Awards: _____

(attach additional page if needed)

Category III- 20% of total application score

WNYQHC Activities:

Volunteer Activities:

_____	Year(s)	_____
_____	Year(s)	_____
_____	Year(s)	_____
_____	Year(s)	_____

Fundraisers:

_____	Year(s)	_____
_____	Year(s)	_____
_____	Year(s)	_____
_____	Year(s)	_____

Club hosted Show help:

_____	Year(s)	_____
_____	Year(s)	_____
_____	Year(s)	_____
_____	Year(s)	_____

Other Club Activities:

_____	Year(s)	_____
_____	Year(s)	_____
_____	Year(s)	_____
_____	Year(s)	_____

(Attach additional page if needed)

Category IV - 15% of total application score

Extracurricular Activities: Academic Activities

Honors _____ Year _____

Awards _____ Year _____

Offices _____ Year _____

Activities _____ Year _____

Community Activities _____ Year _____

Clubs _____ Year _____

Employment _____ Year _____

Service Activities _____ Year _____

(Attach additional page if needed)

Category V - 15% of total application score

References:

The applicant must have submitted on his/her behalf at least three (3) recommendation letters. These forms must be sent, *separate* from the application directly to WNYQHCI/Scholarship Committee Chair; Amy Hanssen, 9063 Chestnut Ridge Road, Middleport, NY 14105, by the individual making the recommendation. List those you have requested to write recommendations.

Academic Reference:

Name: _____

Address: _____

City: _____

State: _____

Equine Reference:

Name: _____

Address: _____

State: _____

Personal Reference:

Name: _____

Address: _____

City: _____

State: _____

I have personally prepared this application and believe it to be correct:

Signature of Applicant:

_____ Date: _____

Printed Name of Applicant:

_____ Date: _____