

# ALABAMA AMATEUR QUARTER

## HORSE ASSOCIATION

### SCHOLARSHIP APPLICATION

DEADLINE: DECEMBER 31, 2024

#### APPLICATION INSTRUCTIONS:

- Please type or print in blue or black ink.
- Complete the application in the spaces provided, additional attachments will not be accepted.
- Include two letters of reference
- Include a copy of your transcript
- Essay on how horses have influenced your life

AQHA/AQHHA ID #: \_\_\_\_\_ SS #: \_\_\_\_\_

Applicant's Name: \_\_\_\_\_ Sex:  Male  Female

Address: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_ Age: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Parent (s) or Legal Guardian (s): \_\_\_\_\_ Parent(s) AQHA ID#: \_\_\_\_\_

Occupation (s): \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

#### ALQHA or ALQHHA ACTIVITIES

List any activities in which you have participated:

---

---

---

---

---

**EQUINE / AGRICULTURE RELATED ACTIVITIES**

**In the space below, list any equine related clubs or activities in which you have participated:**

---

---

---

---

---

**SCHOOL RELATED ACTIVITIES:**

**List any clubs or activities in which you have participated:**

---

---

---

---

---

**List any awards or honors you have received:**

---

---

---

---

---

**REFERENCES:**

**Name:** \_\_\_\_\_

**Name:** \_\_\_\_\_

**ACADEMIC INFORMATION**

I am currently attending?  High School, class rank \_\_\_\_\_ of \_\_\_\_\_.  College

Please list classification: \_\_\_\_\_  
Example: Freshman, Sophomore, etc.

Numerical Average or cumulative GPA: \_\_\_\_\_

Intended Career Path: \_\_\_\_\_

College / Higher Education Institution you will be attending? \_\_\_\_\_

Proposed College Major: \_\_\_\_\_

List name(s) of Educational Institution(s) in which you have attended, beginning with the most recent:

\_\_\_\_\_  
Name Location Year(s) Attended

\_\_\_\_\_  
Name Location Year(s) Attended

\_\_\_\_\_  
Name Location Year(s) Attended

**VERIFICATION BY APPLICANT**

I hereby certify the statements recorded in this application are true and accurate. I meet all requirements set forth by the Alabama Amateur Quarter Horse Association. I understand if any statement presented in this application is untrue, I may be disqualified.

My signature of acceptance: \_\_\_\_\_  
*Signature of Applicant* *Date*

If applicant is 18 years of age or younger: \_\_\_\_\_  
*Signature of Parent or Guardian* *Date*

**COMPLETE AND RETURN APPLICATION AND SUPPORT MATERIALS TO:**

**Alabama Amateur Quarter Horse Association  
% Jackie Rushton  
1914 County Road 107  
Prattville, AL 36066  
(334) 467-5096**