

**SSHBEA  
LADIES' AUXILIARY SCHOLARSHIP  
FUND INFORMATION**

**PURPOSE:**

**THE SSHBEA LADIES' AUXILIARY SCHOLARSHIP FUND** was founded to provide a means by which young people interested in the horse industry could apply and receive financial assistance to pursue advanced schooling upon graduation from high school. An applicant is eligible to receive this scholarship only one time.

**AMOUNT OF SCHOLARSHIP:**

Scholarship money will be paid directly to the recipient's school of choice in the amount of \$1,000.

**ELIGIBILITY:**

Any student graduating during the current school year or already graduated from high school and who has been involved in the **SSHBEA Association** in some manner is eligible to apply. The scholarship is for use by the recipient attending an accredited junior college, senior college or university, professional or trade school. Selection of the scholarship recipient will be based on the applicant's involvement in the spotted horse industry, his/her academic achievement (a minimum of 2.5 GPA on a 4.0 scale), his/her extra curricular and/or community involvement, and his/her financial need.

**APPLICATION REQUIREMENTS:**

1. Applications must be postmarked by **August 30th**
2. The applicant must submit an official high school transcript and ACT or SAT with the application.
3. Include a recent photograph with the application.
4. Applications must be typed or written neatly in ink.
5. Send **all** required materials in one envelope to:

**SSHBEA Ladies' Auxiliary  
Rita Colbert  
160 Poe Road  
Tullahoma, TN 37388**

Applications will be screened by the SSHBEA Ladies' Auxiliary for the sole purpose of determining an involvement with the SSHBEA Association. Recipient selection will be by a committee independent of the SSHBEA Ladies' Auxiliary.

**SSHBEA  
LADIES' AUXILIARY  
SCHOLARSHIP APPLICATION**

**GENERAL:**

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone number (\_\_\_\_\_) \_\_\_\_\_

Date of Birth \_\_\_\_\_

High School \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

GPA \_\_\_\_\_ ACT \_\_\_\_\_ or SAT \_\_\_\_\_

Number of students in class \_\_\_\_\_ Rank in class \_\_\_\_\_

Name and address of college, professional or trade school you are planning to attend or are currently attending. (If undecided, list schools under consideration.)

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Have you been accepted? \_\_\_\_\_

Where will you live while attending college? At home \_\_\_\_\_, On Campus \_\_\_\_\_, Other \_\_\_\_\_. If other, give details.

Estimated Tuition costs \_\_\_\_\_

Estimated Living Expenses (dorms, meals, books, etc.) \_\_\_\_\_

**PARENTAL AND FAMILY FINANCIAL DATA:**

Father's occupation and employer: \_\_\_\_\_

Mother's occupation and employer: \_\_\_\_\_

Total approximate gross income of family for last income year

\_\_\_\_\_ \$15,000 - \$20,000

\_\_\_\_\_ \$21,000 - \$25,000

\_\_\_\_\_ \$26,000 - \$30,000

\_\_\_\_\_ \$31,000 - \$35,000

\_\_\_\_\_ \$36,000 - \$40,000

\_\_\_\_\_ \$41,000 - \$45,000

\_\_\_\_\_ \$46,000 - \$50,000

\_\_\_\_\_ \$51,000 - \$60,000

\_\_\_\_\_ \$60,000 or above

List the ages of dependent children living at home: \_\_\_\_\_

List the age and year in school for any dependent children in college: \_\_\_\_\_

\_\_\_\_\_.

Explain any unusual financial circumstances or any financial circumstances that you feel we should know in considering your application. (You may attach a separate sheet).

**EXTRACURRICULAR AND / OR COMMUNITY INVOLVEMENT:** (May attach separate sheet).

List honors and awards earned in high school. (Beta, National Honor Society, etc.)

List participation in class or school organizations and activities. (Athletics, clubs, newspaper, music, etc.)

List all out-of-school activities and organizations. (Church, charity, volunteer.)

List all employment during high school years; give the average hours worked per week.

Have you applied for or do you expect to receive (or been granted already) scholarship aid from any other source? If "Yes" give details.

**Include two letters of recommendation** with this application with none being related to you.

Names of persons furnishing letters of recommendation:

1. \_\_\_\_\_ Position \_\_\_\_\_

2. \_\_\_\_\_ Position \_\_\_\_\_

**INVOLVEMENT IN THE SPOTTED SADDLE HORSE BREEDERS' & BREEDERS' ASSOCIATION:**

Please attach a brief explanation of your participation in the SSHBEA ASSOCIATION.