

# RMRHA SCHOLARSHIP APPLICATION

Date of application: \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

Phone number: \_\_\_\_\_ email address: \_\_\_\_\_

Address: \_\_\_\_\_

RMRHA membership # \_\_\_\_\_

Mothers name: \_\_\_\_\_ Phone number: \_\_\_\_\_

Fathers name: \_\_\_\_\_ Phone number: \_\_\_\_\_

Educational Institution to which you have been accepted and you plan to use this scholarship  
for:

Address: \_\_\_\_\_

School Phone: \_\_\_\_\_ Start date: \_\_\_\_\_

Student ID if known: \_\_\_\_\_

Major/Course of Study Planned: \_\_\_\_\_

Current High School, College, or other school Attending: \_\_\_\_\_

Address: \_\_\_\_\_

School phone: \_\_\_\_\_

Semesters/Trimesters applying for: \_\_\_\_\_ fall 2024 \_\_\_\_\_ school year 2024/2025

Please attach the following to this application:

1. Letter of recommendation from a horsewoman or horseman
2. Letter of recommendation from a teacher or advisor
3. Letter of recommendation from someone outside the horse industry (employer, clergy, mentor)
4. Current year academic record
5. Statement from you of your equine background
6. List of your community involvement and/or activities
7. Statement of sense of direction for furthering education
8. Paragraph(s) explaining why you feel you should receive this scholarship and what it means to you

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

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Email your **complete** application packet to [hltreiner@icloud.com](mailto:hltreiner@icloud.com) or mail or deliver to:

Holly Tracy

RMRHA Educational Scholarship

14745 County Road 3

Longmont CO 80504

Application packet must be complete and received before midnight, November 25, 2023.

Incomplete applications will not be accepted.

**For RMRHA (Please do not fill out)**

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Date Application received: \_\_\_\_\_ complete? \_\_\_\_\_ Y/K

Amount of Award: \_\_\_\_\_ Fall Semester 2023: \_\_\_\_\_ 2024/2025 school year: \_\_\_\_\_