BOB ANTHONY MEMORIAL SCHOLARSHIP NOMINATING FORM

Name of Nominated Rider:		Rider Home Address:
College/University:		Rider Email Address:
Name of Nominating Coach or Advisor:		Coach/Advisor Email Address:
Has the Nominated Rider Competed in Class 16 – Ope Class 15 – Level 2 Ranch Riding - during the 2024-202 year? (<i>Yes or No</i>):		Is the Nominated Rider a full-time undergraduate student and member of the IHSA? (<i>Yes or No</i>):
LIST NOMINATED RIDER'S ACHIEVEMENTS, ACCOMPLISHMENTS, AND RESPONSIBILITIES (completed by coach, advisor or team captain)		
EXPLAIN WHY YOU ARE NOMINATING THIS RIDER, PLEASE DESCRIBE RIDER'S FINANCIAL NEED (completed by coach, advisor or team captain)		
NOMINATION FORM IS DUE ON FEBRUARY 20, 2025	COACH, ADVISO	R OR TEAM CAPTAIN NAME AND DATE
Desiree Molyneux Chairperson – Bob Anthony Memorial Scholarship desiree.molyneux@reedleycollege.edu	Name:	
Forms must be submitted via email only.	Date:	