

Southern Enduro Riders Association  
Dexter Leadbeater  
Scholarship Application

Submit this form along with an essay.

Please **type** or **print** your answers.

1. Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

2. Address: \_\_\_\_\_

City: \_\_\_\_\_ St.: \_\_\_\_\_ Zip: \_\_\_\_\_

3. Daytime Phone Number: \_\_\_\_\_

4. Date of Birth: \_\_\_\_\_

5. I will be attending college/university as a: (Circle one)

Freshman      Sophomore      Junior      Senior      Master's Level

Technical School Student      Medical School Student

Nursing School Student (year \_\_\_\_\_)

Other: \_\_\_\_\_

6. I will be attending the following school:

\_\_\_\_\_

**Proof of acceptance or current student enrollment from the above school, in writing, is required.**

7. Grade Point Average (GPA): \_\_\_\_\_ (On a 4.0 scale)

Attach proof of GPA. High School or College/University

8. ACT Score: \_\_\_\_\_

Or

SAT Score: \_\_\_\_\_

A copy of your ACT **or** SAT score sheet is required for incoming college **Freshmen** only.

9. Name & address of parent(s) or legal guardian(s)

Name(s) \_\_\_\_\_

Street: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ ZIP: \_\_\_\_\_

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Home phone of parents or legal guardians: \_\_\_\_\_

10. Name of High School and year of graduation:

\_\_\_\_\_

11. List any Colleges/Universities you have attended:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

12. What specialty/major do you plan to major in as you continue your education?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

13. What are your educational and professional goals and objectives?  
(You can attach your resume if it has this information.)

\_\_\_\_\_  
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\_\_\_\_\_

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14. List your academic honors, awards and membership activities while in high school or college: (You can attach your resume if it has this information.)

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15. List your community service activities, hobbies, outside interests, and extracurricular activities: (You can attach your resume if it has this information.)

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Signature of scholarship applicant: \_\_\_\_\_

Date: \_\_\_\_\_

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Mail to: Deborah Rudder  
155 Kaye Dr.  
Madison, MS 39110