SCHOLARSHIP APPLICATION

• Preferred to be a member of ABCR or ICHO.
• Must be a full time student (9-12 credit hours).
• Designate if check to be mailed to college of choice, or mailed to individual, but check must be written in name of college.
• Individual will be required to show grades for first year of education.
• Application to be approved by CHA Board.

Name: ______________________________________________________________
Address: __________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
Phone: _________________________________________________________________
Email: ________________________________________________________________
College/ University you have been approved at: __________________________________________________________
GPA: _______________________

Please use other pages explaining:
  1. High School activities
  2. Community activities
  3. Essay on what you plan to study
  4. Your goal in 1 year, in 5 years
  5. What horse programs you have been involved in.
  6. Your accomplishments with your curly horse
  7. Include 2 letters of recommendation

This area to be completed by a CHA Board Member
Approval: _______________
Date: _________________
Amount: ________________

Send To:  CHA
         2677 CR 112
         Caldwell, TX  77836-8183