

SCHOLARSHIP APPLICATION FOR SCHOOL YEAR 2023-24

Applicant's Personal Information

Name		
Home Address		
City	State	Zip Code
Telephone ()	Date of Birt	h
Email Address		
Parent(s)/Legal Guardian(s)		
College/Technical Institute You Plan to Address (City, State)		
What is your planned course of study?		
What are your career ambitions?		
VBHA Information		
Are you a VBHA member? If	f ves annrovimate	aly for how long?
Give name and address of parent, gran		
Member's Name		
Member's Address		
Tember 5 / Idar ess		
Have you attended VBHA meetings? #_	Events? #	Field Trials? #
Describe your participation in VBHA-spo		

Academic Information

Attach an official transcript to this completed application. The transcript must be an original document that includes the school seal or the signature of a school official.
Name of school you are presently attending: Date you began enrollment at this school:
Other Information
List clubs or activities you have participated in:
List your community involvement:
List honors or awards you have received:
<u>Narrative</u>
Attach an essay (500 words or less) in response to the following: "How can we educate our Virginia Legislators to prevent bill proposals that revise or revoke our heritage of hound hunting when it appears as if these proposals are often based on complaints from opponents to hound hunting that are misleading or untruthful?"
Do not include documentation other than your completed application, official transcript, and $\mbox{\it essay}_{\underline{.}}$
Certification
I certify that all information contained in this application is true and factual. I agree that VBHA may use my name and likeness and any other materials provided by me in this application for purposes of news and/or publicity (including but not limited to print, electronic media, and internet website).
Signature Date VBHA Scholarship Application - Page 2 of 2
VBHA Scholarship Application - Page 2 of 2