

**EASTERN PA. CHAPTER OF THE  
PROFESSIONAL HORSEMEN'S ASSOCIATION  
(EPPHA)**

**Application For Scholarship**

Date: \_\_\_\_\_ Application must be received by December 1st for aid next year.

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

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

\_\_\_\_\_ Email: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_

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

Is Parent/Guardian a Professional Horseperson (Y/N)? \_\_\_\_\_ An EPPHA-member (Y/N)? \_\_\_\_\_

Name and Address of Applicant's High School: \_\_\_\_\_

\_\_\_\_\_

Date of High School Graduation: \_\_\_\_\_

Name and Address of College/Graduate School Where Applicant Plans to Enroll : \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Has Applicant Received Any Previous Grants from the EPPHA (Y/N)? \_\_\_\_\_ How Many: \_\_\_\_\_

Names and Addresses of Two People Who May Be Asked For A Recommendation And/Or Character Reference: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

On reverse side or on separate paper, please give a brief biography on the student (containing a summary of academic background and career plans, any extra-curricular activities whether they be school- or non-school-related, any personal interests or hobbies, any summer or part-time employment, any organizations of which student is now a member and why student desires this EPPHA scholarship).

Please attach a Transcript of your Grades to this application.

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

Please send completed application and transcript to the following address: Joan Jeffries, Line  
Street and Cowpath Road, Apt. U201, Lansdale, PA., 19446