



S.N.E.S.A Scholarship Application

You must submit this form completed along with your event portfolio to a S.N.E.S.A E-board member by Octoberfest horseshow.

E-mail nesa.saddlebred@gmail.com with any questions.

I, _____ have read and understand the conditions of the SNESA as explained in the current **2019 SNESA Scholarship** document. I affirm that I plan to pursue a degree following my high school education. I understand that this application will be available only to qualified people who have hosted a promotional American Saddlebred event and submitted the necessary documentation. I understand that the awarded money will be given directly to the college or university that I identified. If selected as the recipient of this award, I agree to provide SNESA with the college or university chosen for attendance to allow SNESA to deliver the scholarship. I affirm that all of this application, including the portfolio, is my own work or formally cited from other sources. I affirm the information contained herein is true and accurate to the best of my knowledge and belief.

Date _____ Signature _____

Legal name in full (Print/Type) _____
Last Name First Name M.I.

Permanent residence _____
Number, Street, and Apartment Number
City State ZIP

Your address at school (if different) _____
Number, Street, and Apartment Number
City (if studying abroad, add country) State ZIP

Home telephone () _____

School telephone () _____

E-mail address _____

Date of birth _____ Age _____
Month/Day/Year

Name of nominating institution _____

Current cumulative GPA _____ on a scale of _____