

# INDIANA HORSE COUNCIL FOUNDATION, INC. EDUCATION SCHOLARSHIP PROGRAMS



## APPLICATIONS MUST BE RECEIVED BY APRIL 10, 2024

IHCF Education Scholarships are available to Indiana students involved in equine activities. The purpose is to encourage support of the equine industry by providing educational assistance to outstanding men and women. Scholarships are offered and administered by the Indiana Horse Council Foundation (IHCF).

**Jim Kirkham Scholarship** – The Indiana Horse Council (IHC) established the Jim Kirkham Scholarship to honor a lifetime of service to the Indiana equine industry. Jim Kirkham's tireless dedication to the IHCF are prime examples of community service at its best. One Jim Kirkham Scholarship will be awarded to an applicant for an IHCF Education Scholarship with an outstanding record of community service. All other requirements of the IHCF Education Scholarship apply.

### DESCRIPTION

- One (1) or more IHCF Education Scholarships of at least \$500.00 will be available in each program area of study. One (1) Jim Kirkham Scholarship of at least \$1,000.00 will be awarded as determined by record of community service, provided that all other requirements of the IHCF Education Scholarship are met.

### PROGRAM AREAS:

- Beginning a Bachelor Degree Program
  - Continuing a Bachelor Degree Program
  - Professional or Graduate Degree Program
  - Pursuing an Associates' Degree or Technical Training Program
- Beginning a Bachelor Degree Program means the applicant plans to pursue a bachelor degree but is not yet enrolled in studies for a bachelor degree at the time of application.
  - Applicant must be an Indiana resident and not a director or officer of the IHCF.
  - Previous recipients of IHCF Education Scholarships are eligible to apply in successive years if the necessary criteria are met. All applicants must submit a completed current application each year in order to be eligible. • Scholarship recipient must be enrolled as a full or part-time student at an accredited college or university at the time the award check is issued (typically early August). Attendance to a post-secondary school located in Indiana is not a requirement. Scholarship checks will be issued payable jointly to the student and the school. This could possibly affect current tax status; it is highly recommended the appropriate professionals be consulted. • Scholarship recipient is required, when requested by IHCF, to provide verification of expenses, fee statement, and receipts. Scholarship recipient must return scholarship money to IHCF if verification of expenses is requested and not supplied.

**ELIGIBLE APPLICATIONS MUST INCLUDE THE FOLLOWING:**

- A. Completed official, current Education Scholarship Application form.
- B. Copy of most recent transcript from last school attended, including GPA.
- C. A neatly typed state of **250 words or less** explaining your interest in pursuing your course of study citing specific examples indicating your potential for success in this field.
- D. One letter of reference, not from a family member, and no longer than one page. Reference letters must be emailed directly from the writer to [IHCFScholarships@gmail.com](mailto:IHCFScholarships@gmail.com) on or before April 10th.

**IHCF Selection Committee shall determine scholarship award recipients based on the following criteria:**

- A. Evidence of leadership
- B. Duration and extent of equine involvement
- C. Specific evidence of potential for success in chosen field of study
- D. Potential for contribution to the horse industry
- E. Community involvement

*The selection committee reserves the right to withhold scholarships in the event none of the applicants in a program area meet the criteria of the Indiana Horse Council Foundation, Inc.*

All materials including transcript and reference letters must be received by IHCF on or before April 10th by email to [IHCFScholarships@gmail.com](mailto:IHCFScholarships@gmail.com). All reference letters must come from the writer and include the student's first and last name. Schools may send transcripts directly to the IHCF Scholarship email. Recipients will be notified prior to the Good Foundations Clinic and Horse Show and may be requested to participate in an awards ceremony at the event.

Scholarship recipients will be required to write a 250 word summary of academic achievement after the fall semester for the course of study for which the scholarship was awarded, including a photo of the recipient. The summary and photo will be used for IHCF publications. Recipients should forward the summary and photo via email to [IHCFScholarships@gmail.com](mailto:IHCFScholarships@gmail.com) no later than **January 20<sup>th</sup>** of the year following the award.

**Indiana Horse Council Foundation, Inc.  
Education Scholarship Application**

**Email all application materials to:  
[IHCFScholarships@gmail.com](mailto:IHCFScholarships@gmail.com)**

**Deadline: April 10th**

Please type or print legibly:

Applicant Name: \_\_\_\_\_ Date of Birth (mm/dd/yyyy) \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Address for Notification: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone (including area code): Day \_\_\_\_\_ Evening: \_\_\_\_\_

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

**List only your 3 most significant accomplishments in each of the following areas** *(please do not attach resumes):*

**EQUINE RELATED ACTIVITIES / ACHIEVEMENTS:** *(You may attach one page for this area; more than one additional page will not be judged. Descriptions must include date, the activity/achievement, and the significance to you.)*

1. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ACADEMIC HONORS / AWARDS:** *(You may attach one page for this area; more than one additional page will not be judged. Descriptions must include date, the honor / award, and criteria / purpose of the Award.)*

1. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**NON-ACADEMIC RELATED AWARDS / ACTIVITIES / CLUBS:** (You may attach one page for this area; more than one additional page will not be judged. Descriptions must include date, the award / activities / clubs, and the offices held.)

1. \_\_\_\_\_  
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2. \_\_\_\_\_  
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**EMPLOYMENT or VOLUNTEER ACTIVITIES:** (You may attach one page for this area; more than one additional page will not be judged. Please begin with the most recent. )

• **Date:** \_\_\_\_\_ to \_\_\_\_\_  
**Employer or Organization:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_  
**Telephone Number:** \_\_\_\_\_ **Supervisor:** \_\_\_\_\_  
**Description of Duties:** \_\_\_\_\_  
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• **Date:** \_\_\_\_\_ to \_\_\_\_\_  
**Employer or Organization:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_  
**Telephone Number:** \_\_\_\_\_ **Supervisor:** \_\_\_\_\_  
**Description of Duties:** \_\_\_\_\_  
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• **Date:** \_\_\_\_\_ to \_\_\_\_\_  
**Employer or Organization:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_  
**Telephone Number:** \_\_\_\_\_ **Supervisor:** \_\_\_\_\_  
**Description of Duties:** \_\_\_\_\_  
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\_\_\_\_\_

**CHECK ONE CATEGORY:**

- \_\_\_\_\_ Beginning a Bachelor's Degree Program
- \_\_\_\_\_ Continuing a Bachelor's Degree Program
- \_\_\_\_\_ Professional or Graduate Degree Program

**I PLAN TO ATTEND:**

Name of Institution: \_\_\_\_\_

Course of Study / Major: \_\_\_\_\_

Degree / Certification Sought: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

I grant permission to Indiana Horse Council Foundation, Inc., Indiana Horse Council, Inc., and their authorized representatives to use images of me and text attributed to me for educational purposes and to promote the IHC Scholarship program.

*I, (print name) \_\_\_\_\_, hereby swear and attest that all of the information provided in this application and the accompanying materials is true and accurate to the best of my knowledge. Any falsification of information submitted for review may result in the forfeiture and / or termination of any scholarship award granted.*

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

Unsigned or incomplete applications will not be considered.