



## Region 10 Scholarship Program 2023 Application Form

Please check which Scholarship(s) you are applying for:

\_\_\_ Mary Ann Grinnell Scholarship

\_\_\_ Mark Larscheidt Scholarship

Applicant Name: \_\_\_\_\_  
(Please print or type name in full)

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

Telephone: (\_\_\_\_\_) \_\_\_\_\_

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

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

Name of High School or College you are attending now: \_\_\_\_\_

Address of school or college you are now attending: \_\_\_\_\_

Region 10 club(s) you belong to (If Applicable): \_\_\_\_\_

**(A copy of your current membership card(s) in a Region 10 AHA club is required, only IF APPLICABLE.)**

Name of the Club President you belong to: \_\_\_\_\_

Email address for Club President: \_\_\_\_\_

Year of school (this fall): Freshman \_\_\_ Sophomore \_\_\_ Junior \_\_\_ Senior \_\_\_ Graduate school \_\_\_

Field in which you plan to major/are majoring in: \_\_\_\_\_

Why did you decide to study the field you have chosen: \_\_\_\_\_

\_\_\_\_\_

If you are a high school senior, indicate name and address of school or college you plan to attend as an incoming freshman.

Name of College: \_\_\_\_\_

Address of College: \_\_\_\_\_

Anticipated college costs for the coming year: Total Cost: \$ \_\_\_\_\_

Tuition: \$ \_\_\_\_\_

Room & Board: \$ \_\_\_\_\_

College entrance exam scores from tests you took (**A photocopy of exam results is required if you took the test.**) **If you were not able to take the test due to COVID, please note this:**

ACT \_\_\_\_\_

SAT \_\_\_\_\_

Other \_\_\_\_\_

Was not able to take it due to COVID \_\_\_\_\_

Additional high Schools that you attended (**A photocopy of each transcript is required.**)

Secondary school(s) \_\_\_\_\_

Date(s) of graduation \_\_\_\_\_

CUM GPA \_\_\_\_\_ (based on 4.0 scale) Is this GPA Weighted \_\_\_\_\_ unweighted \_\_\_\_\_

Class Rank \_\_\_\_\_ Is this Rank Weighted \_\_\_\_\_ unweighted \_\_\_\_\_

Graduating Class Size \_\_\_\_\_

Higher institutions attended (colleges, technical schools, etc.): (**A photocopy of each transcript is required.**) **This includes PSEO if applicable.**

Scholastic Average  
(based on 4.0 scale)

Name of school or college    Dates of Attendance    Credit hours earned

List any college scholarships you have previously received, by year, name and value: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are you or will you be a candidate for any other scholarship(s) this year? If yes, explain:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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Name of parents/guardian: \_\_\_\_\_

Address of parents or guardian: \_\_\_\_\_

**\* Occupation & financial information is required.**

\*Father's occupation: \_\_\_\_\_ \*Adjusted Gross Income \_\_\_\_\_

\*Mother's occupation: \_\_\_\_\_ \*Adjusted Gross Income \_\_\_\_\_

Number and ages of brothers and sisters: \_\_\_\_\_

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How many siblings will be attending college during the school year beginning this fall? \_\_\_\_\_

\*Applicants adjusted gross income: \_\_\_\_\_

\*Spouse's adjusted gross income, (if married): \_\_\_\_\_

Explain your need for financial assistance: (attach separate sheet if necessary)

Describe your equine related activities: (attach separate sheet if necessary)

Describe your activities and involvement in the Arabian community:

Describe your involvement in your Arabian Club:

What have you done to help promote the Arabian Horse? If you feel you have not promoted your Arabian horse, how can we as an Arabian Community help to promote the Arabian horse to other horse enthusiasts?

If there was one thing to get the youth more involved in the Arabian community, what would that be and how could we as a community go about making that happen:

Please list all Leadership experiences:(kinds of activities, offices held, special activities, etc.) (Attach a separate sheet if necessary.)

Please list all Honors and awards received for school or extracurricular activities: (A resume is fine in place of this).

Is there anything else that you would like the Scholarship committee to know about you?

Thank you for applying for the Region 10 Scholarship(s).

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

Date: \_\_\_\_\_