



## YOUTH CART SERIES SCHOLARSHIP PROGRAM

The North American Six-Horse Hitch Classic Series created this scholarship fund to provide support to a current or past youth cart series exhibitor who intends to further their knowledge and skills beyond high school.

Please complete this electronic form, print, sign, and mail it to:

Youth Cart Series  
Attn: Abby Powell  
PO Box 7146  
Loveland, CO 80537

### REQUIREMENTS/QUALIFICATIONS

1. Member of the Youth Cart Series with a history of competing in the Series.
2. High school graduate within last 10 years or current high school senior who is preparing to enter a post-high school academic program (e.g., College, Equine Chiropractic Program, Farrier Program). Individuals currently enrolled in a post-high school academic program are also eligible to apply.

### SELECTION PROCEDURE TIMELINE

1. Completed applications and required materials must be received by the Youth Cart Series office on or before June 15<sup>th</sup>, 2021.
2. The recipients will be announced by July 15<sup>th</sup>, 2021

### APPLICANT INFORMATION

Last Name \_\_\_\_\_ Frist Name \_\_\_\_\_  
Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Email \_\_\_\_\_  
YOUTH CART SERIES Membership Number \_\_\_\_\_ Birthdate \_\_\_\_\_  
Name of Highschool or Home School Program \_\_\_\_\_  
Program or Trade school or University Attending \_\_\_\_\_ Location: \_\_\_\_\_  
Intended degree or certificate \_\_\_\_\_  
Expected Graduation Year: \_\_\_\_\_

### TRANSCRIPT and REFERENCE

Please mail your current high school or post-high school academic program transcript.

Please include at least one reference letter from an individual within the draft horse industry (who you have not worked/shown for) explaining why he/she feels you are deserving of this scholarship. Please have their signed letter mailed to:

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Attn: Abby Powell  
PO Box 7146  
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## EXTRACURRICULAR ACTIVITIES

What years did you compete in the Youth Cart Series? (Do not include points earned) \_\_\_\_\_

Describe your equine, including draft horse, activities:

Explain how your involvement in equestrian sport has helped mold you as a person. Please include specific examples of goals you have set and reached as a result of the skills you have acquired through your involvement with horses.

Describe your future career goals:

Describe your future goals in the draft horse industry, professional or hobby.

**FINANCIAL INFORMATION**

All information will be held in strictest confidence by the scholarship committee All portions of this application must be completed for consideration. If you are over 21 years of age or married, you do not need to provide parental information unless they are contribution financially to your education.

Estimated annual cost of education: \$ \_\_\_\_\_

Other scholarships (please list): \$ \_\_\_\_\_

Remain financial support needed: \$ \_\_\_\_\_

Parent's Name: \_\_\_\_\_

Parent's Address: \_\_\_\_\_

Adjusted gross income from most recent tax statement: \$ \_\_\_\_\_

Please comment on your financial need and any special or extenuating circumstances:

**Signatures**

Applicants Signature \_\_\_\_\_ Date: \_\_\_\_\_

Parent or Guardian Signature (if under 21 yrs) \_\_\_\_\_ Date: \_\_\_\_\_