

## Long Island Professional Horsemen's Association Scholarship

One of the primary goals of the Professional Horseman's Association is education. To achieve this goal the Long Island chapter may offer scholarships to Professional, Associate and Junior members for verified, in-person, full time attendance for undergraduate study at an accredited two or four year institution. Application for scholarship funds can be made each year of the candidate's undergraduate study. It is possible for a candidate to be awarded a scholarship during more than one academic year. These scholarship funds can NOT be used to purchase riding equipment, pay for training lessons, entry fees for shows or other show expenses.

The total amount of funds available for scholarships will be determined each year by the Treasurer and Finance Committee and approved by a membership vote. The number of scholarships and the amount of each scholarship shall be decided by the Scholarship Committee and be presented to the Chapter's Board of Directors.

To qualify for a scholarship a candidate must:

1. Have been member in good standing for at least two consecutive calendar years. If the second year of membership is the year in which the application is made, the membership dues for that year must be received by the Treasurer prior to February 1st of that year.
2. Submit an application no later than May 31st of each year.
3. Write an essay, approximately 500 words, explaining why he or she should be awarded a scholarship and how it will further his/her career.
4. Provide two (2) letters of recommendation supporting the candidate's level of motivation and the probability of success in his/her chosen profession.
5. Provide transcripts, if requested by the Scholarship Committee.
6. Be interviewed by the Scholarship Committee.
7. Provide verification of full time enrollment to an accredited two or four year institution.

Applications can be obtained by contacting Harriet deLeyer, 631-726-0107  
885 Seven Ponds Towd Rd. ,Southampton, NY, 11968

LONG ISLAND PROFESSIONAL HORSEMEN'S ASSOCIATION

Scholarship Application

Directions:

Complete all the items below and write the essay requested. Applications must be typewritten or printed neatly with either a blue or black pen. Obtain the two Letters of Recommendation and return them with your application no later than May 31st. Applications received after that date will be returned.

Mail your completed application to:

Harriet deLeyer  
885 Seven Ponds Towd Rd.  
Southampton, NY 11968  
631-726-0107

Name: \_\_\_\_\_ Social Security #: \_\_\_\_\_

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

Town: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Type of Membership: Professional, Associate, or Junior: \_\_\_\_\_

Name of your Trainer: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Barn name: \_\_\_\_\_

College you will be attending: \_\_\_\_\_

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

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

Fill in the two calendar years you have been a PHA Member. \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Write an essay of approximately 500 words indicating why you should receive this scholarship, exactly what you will do with it (what school you intend to go to and what you plan to study) and how it will further your career. We would like to know something about you as a person, your hopes, your dreams, the role horses play in your life, etc.

Long Island Professional Horsemen's Association

Letter of Recommendation

Scholarship Candidate: \_\_\_\_\_ requests that you write a letter of recommendation to support his/her scholarship application. We are interested in the candidate's level of motivation and probability for success in his/her chosen profession. Please complete this form and return it with your letter of recommendation to the candidate. Thank you.

Your Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Signature: \_\_\_\_\_

Relationship to Candidate: \_\_\_\_\_

How long have you known him/her and in what capacity? \_\_\_\_\_

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Your Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Signature: \_\_\_\_\_

Relationship to Candidate: \_\_\_\_\_

How long have you known him/her and in what capacity? \_\_\_\_\_