

PENNSYLVANIA PAINT HORSE CLUB
DOUGLAS GANTZ MEMORIAL SCHOLARSHIP
APPLICATION

The PPHC Douglas Gantz Scholarship fund promotes the educational and social growth of young horsemen and women by awarding annual scholarships. This program is open to any PPHC member who has been actively involved in the programs and shows of the Pennsylvania Paint Horse Club.

Applications must be postmarked by August 1 of the awarding year.

PPHC scholarship checklist:

- Completed personal and family information
- Completed all scholastic information
- Included a 500-word essay on educational plans and goals
- Included a photograph
- Provided a transcript covering grades 9-12
- Listed all PPHC and other horse-related activities
- Noted all extracurricular and community activities
- Provided each reference with a recommendation form
- Signed the application
- Provided a college transcript if applicable

GENERAL INFORMATION

Grants of \$1,000 per year are available for students seeking to further their education either at a four-year college or at an equine related vocational training school.

Applicant must be a PPHC member in good standing and involved in horse activity using a Paint Horse or contributing actively to the PPHC for one year prior to the time of application.

Applicant must be a high school graduate.

This scholarship does not have any age restrictions.

The application must be postmarked no later than August 1.

All applications must be accompanied with a current photograph.

Students awarded the scholarship may reapply for a second year scholarship.

Scholarship funds will be paid directly to the institution and will not be issued to the student or their family.

All applications become the property of PPHC.

All information will be held in strictest confidence by the Review Committee.

APPLICANT'S PERSONAL INFORMATION

Name: _____ Date of Birth _____

Social Security Number _____ PPHC number _____

Phone Number _____ E-mail _____

Address: _____

FAMILY INFORMATION

Father's Name _____ Address _____

Mother's Name _____ Address _____

Guardian or Other _____

SCHOLASTIC RECORD

Name of School _____ Location _____

Dates Attended _____

PLEASE INCLUDE A SEPARATE 500 WORD OR LESS EXPLANATION OF YOUR EDUCATIONAL PLANS AND GOALS.

I have personally prepared this application and believe it to be correct.

Signature of Applicant _____ Date _____

Printed Name of Applicant _____ Date of Birth _____