



**Rancho California  
Arabian Horse Association**

# **Scholarship Application**

**Scholarship Applicant**

Name: \_\_\_\_\_

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

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

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

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

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Career Goal or Course of Study: \_\_\_\_\_

School Planning on Attending: \_\_\_\_\_

**Personal Background**

Education: Schools Attended (omit elementary & middle school):

Name of School	Location	Dates Attended
_____	_____	_____
_____	_____	_____
_____	_____	_____

Grade Point Average: \_\_\_\_\_

(attach copy of transcripts)

College Entrance Exam Scores (attach copy of results)

ACT \_\_\_\_\_ SAT \_\_\_\_\_ Other \_\_\_\_\_

Other educational information you would like considered

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

**Extra Curricular Activities**

A. List extracurricular activities you have been involved in and offices held: i.e. student government, sports, horse club, etc.

---

---

---

B. What contributions did you make to the above organizations?

---

---

---

C. What personal benefits did you receive from the organizations listed above?

---

---

---

D. List any honors or awards you have received.

---

---

---

E. Describe your involvement and accomplishments in equine activities.

---

---

---

**References**

At least two (2) and not more than (4), letters of recommendation MUST BE submitted with the application, on behalf of the applicant. Required letters include one (1) letter from a civic or community leader: and one (1) from the applicant’s high school principal, counselor or college/university faculty member. Referenced will NOT be accepted by any member of the Rancho California Arabian Horse Association Scholarship Committee.

LIST THOSE YOU HAVE REQUESTED TO WRITE LETTERS OF RECOMMENDATION.

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Title: \_\_\_\_\_ Title: \_\_\_\_\_

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

City & State: \_\_\_\_\_ City & State: \_\_\_\_\_

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Title: \_\_\_\_\_ Title: \_\_\_\_\_

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

City & State: \_\_\_\_\_ City & State: \_\_\_\_\_

The information contained in this application is true and accurate to the best of my knowledge.

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

ALL INFORMATION WILL BE HELD IN THE STRICTEST CONFIDENCE  
BY THE SCHOLARSHIP COMMITTEE

All applications and supporting materials become the property of  
RCAHA Scholarship Committee and cannot be returned

*Applications should be sent to:*

RCAHA Scholarship Committee  
40101 Calle Vecina  
Temecula, CA 92592

Or email to:  
info@RCAHA.org