

INSTRUCTOR TRAINING COURSE SCHOLARSHIP
APPLICATION

Note: All requests for scholarship funds must include a completed scholarship form and accompany a completed Instructor Training Course registration packet (including all pre-requisite criteria).

Date Submitted _____

Name _____

Address _____

City _____ State _____ Phone _____

Yearly Income _____

Please give details below as to your scholarship needs, your philosophy on therapeutic riding, and what you intend to do after completion of the course (use more pages as necessary):
