



OHIO INTERSCHOLASTIC HORSEMANSHIP ASSOCIATION

SCHOLARSHIP APPLICATION

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE NUMBER: _____

EMAIL ADDRESS: _____

SCHOOL YOU ATTEND: _____

YOUR EQUESTRIAN TEAM: _____

YEARS OF PARTICIPATION IN OIHA: _____

OTHER EQUESTRIAN ORGANIZATIONS YOU ARE A MEMBER OF: _____

REQUIREMENTS

- 4 years of participation in OIHA (If your school has not participated in OIHA for 4 years then this does not apply)
- Letter of recommendation from your coach, teacher, and a personal reference
- 350-400 word essay on your OIHA experience and what it has done for you

Due by OCTOBER 20th
Submit to your District Chairman