



# Oklahoma Dressage Society Education Scholarship Fund Application Form

Please review the ODS Education Scholarship information before filling out this application form.  
**Be as specific as you can.**

Date of Application: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_

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

\_\_\_\_\_

Telephone (Cell): \_\_\_\_\_

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

Are you an ODS Member in good standing?  Yes  No      Status:  Junior  Amateur  Open

Do you compete in dressage?  No  Yes    If Yes, Please check all applicable below.

Schooling Shows       Recognized Shows       Locally  Regionally  Nationally

Who is your current riding instructor? \_\_\_\_\_

Name and date of anticipated educational event or training you would like to attend:

\_\_\_\_\_

Tell us about the instructor and / or educational event you would like to attend.

**(Please attached any printed material / flyer and completed application to event).**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

How do you intend to benefit from attending this educational event? What are your goals for attending this event?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Would this scholarship allow you to do what you would be unable to do otherwise?  Yes  No

\_\_\_\_\_

Describe and list the **ODS volunteer work** you have done in the past? Start with the most current.

2019 \_\_\_\_\_ Capacity \_\_\_\_\_

2018 \_\_\_\_\_ Capacity \_\_\_\_\_

2017 \_\_\_\_\_ Capacity \_\_\_\_\_

Other \_\_\_\_\_ Capacity \_\_\_\_\_

List the **ODS educational events and meetings** you have attended in the past and in what capacity:

2019 \_\_\_\_\_ Capacity \_\_\_\_\_

2018 \_\_\_\_\_ Capacity \_\_\_\_\_

2017 \_\_\_\_\_ Capacity \_\_\_\_\_

Tell us why you should be selected for this scholarship:

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Applicant Signature \_\_\_\_\_

Date \_\_\_\_\_

Please send all applications to: *Robin Grain-Walkup – Scholarship Committee Chair*  
*2836 NW 13<sup>th</sup> St. Oklahoma City, OK 73107*

*Committee Notes:*

*Date Received:* \_\_\_\_\_