The Wrangler ASPIRE Award

For AQHYA members who excel in leadership and service areas.



The Wrangler ASPIRE Award assists in developing and improving scholarship, leadership and community interest and participation of young horsemen.

Please complete the following information. Type or print on this form, including additional sheets if necessary. Applications must be mailed to AQHA by May 1 of the year the scholarship is awarded. The Wrangler ASPIRE Award will be presented at the Youth Excellence Seminars and AQHYA Convention. In addition to completing the application, please include a resumé and one letter of reference.

The ASPIRE award winner will receive a \$1,000 scholarship provided by Wrangler.

Name:	
Home Address:	
City, State, Zip:	
Fax number:	E-mail address:
Phone:	
Age: AQHYA Identification number:	
Are you currently attending college? yes no If yes, list proposed major:	
Intended career path:	
Are you currently attending high school? yes no If yes, please list class rank and GPA:	

List name(s) of educational institution(s) in which you have attended, beginning with the most recent:

Name	Location	Year(s) attended	
Name	Location	Year(s) attended	
Equine/Agriculture Related Activities			
List other AQHA or AQH	IYA State or Provincial Affiliates you have	ve been or are a member of:	
Affiliate:		Year	
Affiliate:		Year	
AQHYA STAR Program AQHYA Racing Experier Horseback Riding Progra AQHYA contests: Which contests and what	m Level achieved: Number years did you participate?	r of years enrolled: the Races Championship Experience er of years enrolled:	
Do you plan on attending AQHYA Delegate YES Please list any personal co	Youth Excellence Seminars Years atterves YES this year? YES NO S NO Years participatedontributions you have made to promote A	QHA or AQHYA:	
How many affiliate meeti List any equine related cl	ubs/activities in which you have participa	ted:	
	wards received through your equine invol	vement:	

List any activities including government, community service, etc.:		
Verification by Applicant		
I hereby certify the statements recorded in this application are true and accurate. I understand if any statement presented in this application is untrue, I may be disqualified. If selected as the recipient, I understand I may be listed in The American Quarter Horse Journal and/or		
The American Quarter Horse Racing Journal.		
My signature verifies I agree with and accept the information pr	inted above.	
Print your name as you wish it to appear in AQHA publications:		
Signature of Applicant:	Date:	
If applicant is 18 years of age or younger:		



Signature of parent or guardian:



Date: _____