COLORADO STATE HIGH SCHOOL RODEO ASSOCIATION MEMBER AWARD AND SCHOLARSHIP REQUIREMENTS

<u>DEADLINE: May 1, 2025 – Must Be Turned into State Secretary</u>
(NO EXCEPTIONS)

To be considered for either the CSHSRA member award or interview scholarship, members must submit the following:

| Checklist | |
|-----------|---|
| | 1. Completed application <i>due by May 1, 2025</i> |
| | 2. Recommendation form completed by principal/counselor (*home school see application note) |
| | Applicant is responsible to make sure school sends this by due date! |
| | 3. Transcripts |
| | 4. Essay |
| | 5. Interview with scholarship review board at State Finals |

The four-year member award will be awarded \$500 upon completion of the above referenced forms, including the school form and transcripts. There will not be an interview for this award.

Applicants will be invited to an interview with an independent committee made up of people from outside the CSHSRA organization during State Finals. A minimum of \$3000 (total) will be given out depending on the committee's decision.

Performance based awards are as follows:

| • | 1st and 2nd round WINNERS at STATE FINALS | \$100/event |
|---|---|-------------|
| • | Queens contestant winner | \$250 |
| • | Year-end All-Around GIRL and BOY | \$250 |
| • | State Finals All-Around GIRL and BOY | \$250 |

The scholarship and award winners will need to furnish the CSHSRA Scholarship Committee with the name and address of the college that they are enrolled in. Written requests must be made to receive all scholarship/award money. You must have completed high school and be enrolled in a trade school, post secondary vocational school, college, or university. This information must be in writing or emailed and submitted to the scholarship committee address:

CSHSRA
ATTN: SCHOLARSHIP COMMITTEE
PO Box 11
Burns, CO 80426
cshsra@gmail.com

Scholarship payment will be paid upon request (Member must send a letter asking for the money, Student ID, proof of schooling registration & College Address). All funds must be applied for within 5 years after high school graduation or the money will go back into the Scholarship Account. Requests will be reviewed and checks mailed to the **SCHOOL**.

All questions can be directed to the State Secretary or to a Board of Directors

COLORADO STATE HIGH SCHOOL RODEO ASSOCIATION

Application for Four Year Member Award and Scholarship

Application must be sent to (delivery receipt recommended):

Colorado State High School Rodeo Association Attn: Scholarship Committee

PO Box 11 Burns, CO 80426

Check below what you are applying for, ok to check only one or both, only one application will be necessary

| ☐ I am applying for the Four Year Member Award (No interview will be given) ☐ I am applying for the CSHSRA Scholarship (Interview presentation at State Finals is necessary) | | | | | |
|---|--|--|--|--|--|
| Name in full | | | | | |
| Home Address: | | | | | |
| Telephone number | | | | | |
| Date of BirthCSHSRA Back Number: | | | | | |
| High School Name and Address | | | | | |
| Which college, university trade school or vocational school do you plan to attend? | | | | | |
| Have you applied for admission?Have you been accepted? | | | | | |
| Offices held in school organizations and clubs | | | | | |
| Out of school activities/offices (i.e. 4-H, rodeo clubs, etc.) | | | | | |
| Awards, honors, etc | | | | | |
| CSHSRA event director positions | | | | | |
| Volunteer work: | | | | | |
| (Attach additional pages if necessary) | | | | | |
| Signature of Applicant Date | | | | | |

PLEASE WRITE A BRIEF ESSAY:

"WHAT OR WHO HAS MADE THE BIGGEST IMPACT ON YOUR LIFE THUS FAR AND WHY" (limit to 300 words attach additional page if necessary)

THIS PAGE IS TO BE COMPLETED BY THE HIGH SCHOOL COUNSELOR OR PRINCIPAL

* Home school students must have an adult other than family/parent complete this form and write an additional letter of recommendation

NOTE TO PRINCIPAL OR COUNSELOR:

Please complete items below and mail with a transcript (Must be received by May 1st 2025) to:

CSHSRA Attn: Scholarship Committee PO Box 11 **Burns, CO 80426**

Your recommendation will be held in strict confidence.

| Student's Name | | | | | | | |
|--|---|---|--|--|--|--|--|
| Size of graduation class | | | Class Rank | | | | |
| Check One: | commend | | | | | | |
| | I recommendI recommend with reservation | | | | | | |
| | | | | | | | |
| | I do not recommend this student for a scholarship | | | | | | |
| Please evaluate this studen | t in the follow | ving areas: (Circle the | appropriate re | esponse) | | | |
| Diligence in schoolwork: Respectful to peers/adults: Seeks responsibility: Involvement in school: | Excellent Excellent | Very Satisfactory | Satisfactory Satisfactory Satisfactory Satisfactory Satisfactory Satisfactory Satisfactory | Marginal Marginal Marginal Marginal Marginal Marginal Marginal Marginal Marginal | | | |
| Diligence in schoolwork: Excellent Very Satisfactory Satisfactory Marginal Respectful to peers/adults: Excellent Very Satisfactory Satisfactory Marginal Seeks responsibility: Excellent Very Satisfactory Satisfactory Marginal | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| Signature: | | Title: | | Date: | | | |
| School Name: | Official Seal: | | | | | | |