2024 College Assistance Requirements
Fall Semester

Requirements for submitting a College Assistance Application

Ω Applicant / Parent or Legal Guardian must be a 2024 ISA Member and hold a 2024 IHRC Standardbred License
Ω Applicant / Parent or Legal Guardian must be an Indiana resident by April 30, 2024
Ω Applicant must be working towards a 2-year associate’s, a 4-year bachelor’s degree, a master’s degree or a technical trade school.
Ω Applicant must be currently enrolled as either a part time or full time student
Ω Applicant must hold at least a 2.5 GPA

The following items must be returned to the I.S.A. Office to be eligible for College Assistance

_____ Completed ISA College Assistance Application

_____ Copy of one of the following to verify Applicant / Parent or Legal Guardian Indiana Residency:
Indiana Driver's License, Indiana Voter's Registration or the first page of most recent Indiana State Tax Return

_____ Copy of the Applicant/Parent or Legal Guardian’s IHRC Standardbred License and ISA membership card

_____ Proof of 2024 Fall Registration from College/University or Trade School

_____ Verification of part time or full time student status

_____ Verification of most current GPA

_____ Letter of recommendation from a high school teacher or college professor

_____ Letter of recommendation from Standardbred affiliate (other than immediate family)

_____ Typewritten one (1) page essay that answers the question: “What are your educational goals, and how do you plan to apply your education in the horse-racing industry in Indiana upon graduation?”

A complete application and all the required attachments must be postmarked by July 15, 2024 for the application to be considered. The college assistance award amount may vary per semester based on the number of applicants received and the annual amount budgeted by the ISA. Applications will be evaluated by the ISA College Assistance Committee.

Please mail all required documents to:

The Indiana Standardbred Association  ATTN: ISA College Assistance Committee
311 American Legion Place
Greenfield, IN 46140

For additional questions, please contact the ISA Office at (800) 565-5725 or by email at kristi.isaracing@gmail.com
Please complete the entire application.

I. Personal Information

Name: ___________________________________________   Date of Birth: ___________________
(last)   (first)   (middle)

Address: _________________________________________________________________________
(street)   (city)   (state)   (zip)

Phone: ___________________________________________________________________________
(home)   (cell)   (school)

Email: ____________________________________________________________

II. Academic Information

High School: _________________________________________________________________
(name)   (complete address)

Date of Graduation: ____________________ (mm/dd/year)

College or University you are planning to attend: __________________________________

Your Current Grade Point Average (GPA): _____________________________

Degree & Major you are pursuing: _____________________________________________

Career Objective: ____________________________________________________________

Scholastic Honors and/or Achievements: _________________________________________
____________________________________________________________
____________________________________________________________

Extra Curricular Activities – Discuss your interests other than horses. Include your involvement in community projects, hobbies, and organizations to which you belong to:

___________________________________________________________________________

___________________________________________________________________________

___________________________________________________________________________

___________________________________________________________________________
III. Family Information

Father’s Name: ______________________________________________________________

Father’s Occupation: ___________________________________________________________

Mother’s Name: _______________________________________________________________

Mother’s Occupation: ___________________________________________________________

Legal Guardian (if applicable) ________________________________________________

Applicant / Parent or Legal Guardian’s name who holds a current ISA Membership and IHRC Standardbred License: (Please provide IHRC License #)

IV. Work Experience

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<th>Employer</th>
<th>Job Title</th>
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V. Standardbred Industry Affiliation

Describe your background in the Standardbred Industry:

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

Describe the work experience you have in the Standardbred Industry:

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

Explain how you plan to be involved with Standardbreds after receiving your college education:

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

What three words best describe your feelings about the Indiana Standardbred Industry:

__________________________________________________________________________