



the RACE for EDUCATION

# Winner's Circle Application Process

The Winner's Circle Scholarship Program is designed to reward leadership in SCAAEP and to help offset the escalating cost of veterinary education and minimize debt load at graduation by providing financial aid to students in their 4<sup>th</sup> year of veterinary school. These scholarships will benefit deserving students through a partnership between the AAEP Foundation and The Race For Education, as well as with the support of Platinum Performance.

## To be eligible for this scholarship, a student must

- be a national AAEP student member and active within their school's AAEP chapter;
- currently attend an AVMA-accredited college of veterinary medicine;
- apply during their 3<sup>rd</sup> year for funding during their 4<sup>th</sup> year of veterinary curriculum.

## Supporting materials that must accompany a completed application include:

- 0 Essay on the following topic:  
*What aspect of equine veterinary medicine do you find the most interesting?* (Maximum of 750 words.);
- 0 A brief description of your career goals and how you plan to achieve them (Maximum of 750 words.);
- 0 Two signed and sealed letters of reference (Please use one of the appropriate "Recommendation Letter Forms" found at the end of this application.);
- 0 Current official transcript;
- 0 Financial Need Verification Form;
- 0 Award letter(s) for other scholarships, if applicable.

**STUDENTS: Submit completed application and all supporting materials to your student chapter advisor at your university by February 28<sup>th</sup> each year. Please visit <http://raceforeducation.org/scholarships/> for a complete list of advisors.**

Applications will be reviewed by each university's SCAAEP and The Race For Education Selection Committee. Finalists will be contacted for a personal interview. Scholarship recipients will be selected by the Board of Directors, and all applicants will be notified by May 31<sup>st</sup> each year. Inquiries about the scholarships may be directed to The Race For Education at (859) 252-8648. For more information about The Race For Education, email [info@raceforeducation.org](mailto:info@raceforeducation.org) or visit [www.raceforeducation.org](http://www.raceforeducation.org).

***All submitted financial information is kept confidential and will be shredded following the selection process.***



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# Winner's Circle Scholarship Application

**Please provide information current for the summer of application year.**

Name: (Last, First, Middle Initial) \_\_\_\_\_

**Current address:** \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Primary email: \_\_\_\_\_ Phone: \_\_\_\_\_

**Permanent address:** \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Veterinary college you currently attend: \_\_\_\_\_

Undergraduate degree received from: \_\_\_\_\_

Date of undergraduate graduation: \_\_\_\_\_

Current cumulative GPA: \_\_\_\_\_ on a scale of 1 to \_\_\_\_\_ (*Include official transcript*)

Intended specialty: \_\_\_\_\_

Why did you choose this specialty? \_\_\_\_\_

\_\_\_\_\_

Are you an AAEP member? \_\_\_\_\_ Membership #: \_\_\_\_\_

Have you applied for a Race For Education Scholarship in the past?  Yes  No Year: \_\_\_\_\_

## **Community Involvement and Leadership:**

List extracurricular activities and note any special recognition, leadership roles and honors. Feel free to attach a resume.

List community, religious and/or volunteer activities.

**Financial Information:**

Amount of **TUITION** for academic year at college you attend/will be attending: \_\_\_\_\_

Have you applied for or received financial aid?  No  Yes (Attach a copy of financial aid or scholarship award letter.)

**Have we missed anything?**

Should we be aware of any issues or circumstances not previously addressed that are pertinent to your application? (Attach separate sheet if necessary.)

**Verification of Information**

I hereby certify the statements recorded in this application are true and accurate. I meet all requirements set forth by The Race For Education. I understand that if any statement presented in this application is untrue, I may be disqualified from consideration. If selected as a recipient of a Race For Education scholarship, I understand that I may be listed as a recipient and my image used in various publications. Additional financial information may be requested prior to award decision.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Parent/Guardian, if applicant is 18 years of age or younger:

\_\_\_\_\_ Date: \_\_\_\_\_

The Race For Education offers additional funds through its Assets for Independence Program. Eligible scholarship recipients agree to deposit \$500 into a savings account in their name over a period of up one year. In return, the federal government and The Race For Education will match that with \$2,000 each (for a total of \$4,500). That money, and any interest that has accrued, is the student's but must be used to pay college expenses. Financial eligibility restrictions apply. If you are interested in hearing more about this program, check the appropriate box below:

I am interested in hearing more about this program.  I am not interested in participating.

**These materials must be received by your student chapter advisor  
by February 28<sup>th</sup> each year.**

**If the application and supporting materials are not received by February 28th,  
the application will not be forwarded to The Race For Education  
Selection Committee for consideration.**

**For a listing of SCAAEP chapters, visit [www.raceforeducation.org](http://www.raceforeducation.org) .**

**ACADEMIC RECOMMENDATION COVER LETTER FORM**

**TO BE COMPLETED BY A FACULTY MEMBER WHO MAY OR MAY NOT HAVE TAUGHT THE SCHOLARSHIP APPLICANT.**

Please discuss the student's potential ability to become a positive contributor to society. Describe a significant contribution(s) made by the student through public service or community involvement. Do not duplicate information found elsewhere in the student's application unless you plan to provide more in depth explanations and examples.

The student should provide a copy of his/her GENERAL INFORMATION FORM to the individual drafting this letter. The recommendation letter may be typed on the back of this form or on a separate sheet attached to this form.

**Name of Student** \_\_\_\_\_  
Last Name First Name M.I.

**Your Name** \_\_\_\_\_  
Last Name First Name M.I.

**Title** \_\_\_\_\_ **School:** \_\_\_\_\_

**Address** \_\_\_\_\_  
Number Street Apt. #

\_\_\_\_\_  
City State Zip Code

**Phone** ( ) \_\_\_\_\_

**How long have you known the student?** \_\_\_\_\_

**In what capacity?** \_\_\_\_\_

\_\_\_\_\_

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**FACULTY MEMBER RECOMMENDATION COVER LETTER FORM**

**TO BE COMPLETED BY A FACULTY MEMBER WHO HAS TAUGHT THE SCHOLARSHIP APPLICANT.**

Please discuss the student's potential ability to become a positive contributor to society. Describe a significant contribution(s) made by the student through public service or community involvement. Do not duplicate information found elsewhere in the student's application unless you plan to provide more in depth explanations and examples.

The student should provide a copy of his/her GENERAL INFORMATION FORM to the individual drafting this letter. The recommendation letter may be typed on the back of this form or on a separate sheet attached to this form.

**Name of Student** \_\_\_\_\_  
Last Name First Name M.I.

**Your Name** \_\_\_\_\_  
Last Name First Name M.I.

**Title** \_\_\_\_\_ **School:** \_\_\_\_\_

**Address** \_\_\_\_\_  
Number Street Apt. #

\_\_\_\_\_  
City State Zip Code

**Phone** ( ) \_\_\_\_\_

**How long have you known the student?** \_\_\_\_\_

**In what capacity?** \_\_\_\_\_

\_\_\_\_\_

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_



**PROFESSIONAL RECOMMENDATION COVER LETTER FORM**

**TO BE COMPLETED BY AN EMPLOYER, COMMUNITY LEADER, BUSINESS PERSON OR VOLUNTEER.**

Please discuss the student's potential ability to become a positive contributor to society. Describe a significant contribution(s) made by the student through public service or community involvement. Do not duplicate information found elsewhere in the student's application unless you plan to provide more in depth explanations and examples.

The student should provide a copy of his/her GENERAL INFORMATION FORM to the individual drafting this letter. The recommendation letter may be typed on the back of this form or on a separate sheet attached to this form.

**Name of Student** \_\_\_\_\_  
Last Name First Name M.I.

**Your Name** \_\_\_\_\_  
Last Name First Name M.I.

**Title** \_\_\_\_\_ **Organization/business:** \_\_\_\_\_

**Address** \_\_\_\_\_  
Number Street Apt. #

\_\_\_\_\_  
City State Zip Code

**Phone** ( ) \_\_\_\_\_

**How long have you known the student?** \_\_\_\_\_

**In what capacity?** \_\_\_\_\_

\_\_\_\_\_

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**The Race For Education/Assets for Independence  
Financial Need Verification Form**

**Student Name:** \_\_\_\_\_ **Student Age:** \_\_\_\_\_  
*If you are 21 or older, complete this form for yourself; if you are under 21 complete this with your family's information. Your eligibility cannot be determined unless each question is answered.*

**Last Name of Head of Household:** \_\_\_\_\_

**Number in of adults in household (including self):** \_\_\_\_\_ **Number of children:** \_\_\_\_\_

**Current Address (for correspondence during the summer months):**  
 \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Household Members (including self):**

<u>First Name</u>	<u>Middle Initial</u>	<u>Last Name</u>	<u>DOB</u>	<u>Applying?</u>	<u>Adult?</u>
_____				<input type="checkbox"/>	<input type="checkbox"/>
_____				<input type="checkbox"/>	<input type="checkbox"/>
_____				<input type="checkbox"/>	<input type="checkbox"/>
_____				<input type="checkbox"/>	<input type="checkbox"/>

*Please attach appropriate documentation if you answer yes to the questions below. I.e., Benefits letter for TANF, tax return for EITC, etc.*

	<b>Currently eligible</b>	<b>Currently receiving</b>	<b>Has ever received</b>
<b>TANF Benefits</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Federal EITC</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>State EITC</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

**INCOME**

**Gross Annual Income Amount:** \_\_\_\_\_ *Please attach most recent W2 or tax return.*

**Annual Amount**

**Alimony payment** \_\_\_\_\_  
**Child support** \_\_\_\_\_  
**SSI/SSDI** \_\_\_\_\_  
**Food stamps** \_\_\_\_\_

<u>ASSETS</u>	<u>Value</u>	<u>Balance due</u>
Principal residence	_____	_____
Own other homes	_____	_____
Business ownership	_____	_____
Other property or real estate	_____	_____
Investments (401K, IRA, Stocks, other)_	_____	_____
Checking account	_____	_____
Savings account	_____	_____
Vehicle(s) _	1) _____	_____
	2) _____	_____

<u>LIABILITIES</u>	<u>Value</u>	
Outstanding bills past due	_____	
Student loan outstanding balance	_____	
Medical bills outstanding balances	_____	
Personal loan outstanding balances	_____	
Credit card outstanding balance	_____	
Payday loans	_____	
All other liabilities	_____	Please list: _____

**DEMOGRAPHIC INFORMATION (Of applicant)**

Gender: \_\_\_\_\_ Race/ethnicity: \_\_\_\_\_ Marital status: \_\_\_\_\_

Highest education applicant has completed: (circle one) High school/GED      Some college  
 Associate's degree      Bachelor's degree

Location: (circle one) Major urban area (population more than 1 million)      Rural  
 Minor urban area (population less than 1 million)      Remote

Has the applicant ever used a direct deposit procedure for their paychecks prior to opening their IDA account?     Yes     No

What is your employment status?      Full-time      Part-time      Unemployed