

**EASTERN KANSAS HORSEMAN'S ASSOCIATION**  
**BOB SHERIDAN MEMORIAL SCHOLARSHIP APPLICATION**  
**DUE July 1st**

This scholarship is open to a graduating senior that has participated in the EKHA and intends to further their education by enrolling in a college or trade school.

Name:

Address:

Phone #:

Year Graduated:

Future Plans:

Please write a paragraph of 200 words or less of your EKHA experience. You may attach on a separate sheet.

If you so desire, please share a memory you may have of Bob Sheridan.

Signed:

Date:

Mail to:

Bev Seuser, 3560 S Knoll Lane, Salina, KS 67401