

**JILLIAN POINDEXTER MEMORIAL SCHOLARSHIP
APPLICATION PROCEDURES
“May Jill’s memory ride on forever”**

APPLICATION DEADLINE, BY MAIL ONLY: SEPTEMBER 15, 2023

SCOPE:

The Family of Jillian Poindexter invites applications from TSHA members for a Five Hundred Dollar (\$500) scholarship to be awarded at the Annual TSHA Awards Banquet.

ELIGIBILITY:

*****PLEASE READ ELIGIBILITY REQUIREMENTS CAREFULLY BEFORE APPLYING*****

Any current TSHA member who has paid their dues for 2023 by June 15, 2023 & for 2022 by June 15, 2022 and has no outstanding balance due TSHA.

CRITERIA:

Applicant must have volunteered at TSHA Open Show a minimum of Six (6) hours without receiving TSHA bucks for their service. TSHA volunteer verification forms are available from the Open Show Chairperson

Please attach a resume. Give any information about yourself that will help the Scholarship Committee see who you are, including awards, honors, leadership roles, high school activities, your background, ambitions and goals..

Applicants **MUST** be sure their current transcript (college or high school) is mailed to the Committee on time. (If you are home-schooled, please contact the chairperson for requirements.) All applications **MUST** include two (2) letters of recommendation to be written by someone familiar with your accomplishments, (e.g. teacher, guidance counselor, supervisor etc., not from friends or family members) **to be written on their stationary and signed. LETTERS MUST BE CURRENT (2023).**

All applications must be complete to be considered.

Remember—the application is a reflection of the applicant. Your best is required to receive the best consideration.

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SUBMISSION:

Applications must be mailed to: Jill Poindexter Scholarship
 Walter C.Comire, Jr.
 P.O. Box 1105
 Chepachet, RI 02814

All decisions of the Committee will be final and all submitted material become TSHA property and is non-returnable. The Committee may request verification of project, school records, etc. A personal interview may be required.

Read & Signed _____ **Date** _____