



IEL SENIOR SCHOLARSHIP APPLICATION

NAME: _____

ADDRESS: _____

CITY: _____ ZIP CODE: _____

PHONE NUMBER: _____ S.S.#: _____

E-MAIL ADDRESS: _____

TRAINER'S NAME: _____

TRAINER'S PHONE NUMBER: _____

SCHOOL: _____

SCHOOL ADVISOR'S NAME: _____

SCHOOL ADVISOR'S PHONE NUMBER: _____

Colleges applied to, or career plans: _____

Intended Major: _____

Mail your complete application packet to:
Sharon Liveten,
Interscholastic Equestrian League, Senior Scholarships
11333 Moorpark Street, #204, Studio City, CA 91602

**YOUR COMPLETE APPLICATION PACKET MUST BE
POSTMARKED BY SATURDAY, MARCH 10, 2012**

Materials postmarked after the deadline will not be considered.

If you have any questions, please feel free to call
Christy Morris (818) 790-2582.

Name: _____

IEL PARTICIPATION RECORD

Circle school years in which applicant participated in IEL:

2006/07 2007/08 2008/09 2009/10 2010/11 2011/2012

Circle IEL Shows attended this year: Show 1 Show 2 Show 3 Show 4

Total Years Riding: _____

Grade	Riding Level (N, F, JV, V)	Disciplines (Dressage, Equitation, Hunters, Jumpers)	Show/Year-end Awards
7 th			
8 th			
9 th			
10 th			
11 th			
12 th			

PLEASE HAVE SCHOOL REPRESENTATIVE VERIFY RECORD:

Name: _____ Signature: _____

Phone # _____ Date: _____

Name: _____

PARTICIPATION RECORD FOR NON-IEL SHOWS

Riding Level	Disciplines (Dressage, Equitation, Hunters, Jumpers)	Show/Year-end Awards

Please have Trainer verify record:

Name: _____ Signature: _____

Phone # _____ Date: _____

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Trainer Recommendation

Dear Trainer:

Your student _____ is eligible for an IEL Senior Scholarship. Would you please take a few minutes to write a recommendation for him/her considering not only their riding ability, but also dedication to the sport, attitude, sportsmanship, and anything else you wish to include. Please return to the student for inclusion with his/her application. Thanks in advance.

Name of trainer (please print): _____

Signature of trainer: _____

Date: _____ Trainer's Phone Number: _____

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School Representative Recommendation

Dear School Representative:

Your student _____ is eligible for an IEL Senior Scholarship. Would you please take a few minutes to write a recommendation for him/her considering not only their riding ability, but also dedication to the sport, attitude, sportsmanship, and anything else you wish to include. Please return to the student for inclusion with his/her application. Thanks in advance.

Name of school representative (please print): _____

Signature of school representative: _____

Date: _____ Rep's Phone Number: _____

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School Counselor Recommendation

Dear School Counselor:

Your student _____ is eligible for an IEL Senior Scholarship. Would you please take a few minutes to write a recommendation for him/her considering their academic record, as well as their attitude, peer involvement, and anything else you wish to include. Please return to the student for inclusion with his/her application. Thanks in advance.

Name of school counselor (please print): _____

Signature of school counselor: _____

Date: _____ Counselor's Phone Number: _____

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Charitable Organization Supervisor Recommendation

Dear Supervisor:

Your volunteer _____ is eligible for an IEL Senior Scholarship. Would you please take a few minutes to write a recommendation for him/her considering not only their work for your organization, but also their dedication to the effort, attitude, teamwork, and anything else you wish to include. Please return to the volunteer for inclusion with his/her application. Thanks in advance.

Name of organization: _____

Name of supervisor (please print): _____

Signature of supervisor: _____

Date: _____ Supervisor's Phone Number: _____

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Name: _____

COMMUNITY SERVICE PARTICIPATION RECORD

Grade	Total Hrs Per Organization	Organization	Description of Service
7 th			
8 th			
9 th			
10 th			
11 th			
12 th			

Please have School Community Service Advisor or Organization Supervisor verify record:

Name: _____ Signature: _____

Phone # _____ Date: _____

Name: _____

ACADEMIC SCHOOL RECORD

G.P.A. weighted: _____ unweighted: _____
(Please use directions provided below to calculate G.P.A.s)

S.A.T. scores: _____ or A.C.T. scores: _____

A.P. scores: _____

G.P.A. Calculation Instructions: Our member schools do not calculate grade point averages in a uniform manner. So to be fair to all applicants, we have adopted the following system. Please utilize it when calculating unweighted and weighted G.P.A.s

Unweighted G.P.A. (Gives equal credit to all classes whether regular or advanced):

A+, A, A-: 4.00 points

C+, C, C-: 2.00 points

B+, B, B-: 3.00 points

D+, D, D-: 1.00 points

1. Assign a point value to each class you have taken (excluding non-academic classes such as physical education) for the 9th through 12th grades. Total the points.
2. Divide the total points by the number of classes taken.

Example: English B+ = 3.0

 History A = 4.0

 Biology A- = 4.0

 Art C = 2.0

 Total = 13.0 13.0 points divided by 4 classes = 3.25 G.P.A.

Weighted G.P.A.(Gives extra credit for honors and AP classes):

Regular Classes:

A+, A, A-: 4.00 points

C+, C, C-: 2.00 points

B+, B, B-: 3.00 points

D+, D, D-: 1.00 points

Honors (H) and Advanced Placement (AP) Classes:

A+, A, A-: 5.00 points

C+, C, C-: 3.00 points

B+, B, B-: 4.00 points

D+, D, D-: 2.00 points

3. Assign a point value to each class you have taken based on appropriate point scale detailed above (excluding non-academic classes such as physical education) for the 9th through 12th grades. Total the points.
4. Divide the total points by the number of classes taken.

