The Joe Hull Memorial Law Scholarship in memory of Joe Hull and his service to the Arabian horse community.

I. General Information Name:(first) (last)
_____

II. Date of Birth: Month) (Day) (Year) _____
III. Address: (street) (city) (state) (zip)_____
IV. Phone: _____ (home) _____(cell)
V. Email: _____
VI. Social Security Number: _____
VII. Region 14 Club Name: _____
VIII. Current AHA Number: _____
IX. Academic Information High School (name) (complete address)
_____

X. College or University you are planning to attend:
_____

XI. Degree/Major you are pursuing:
_____

XII. Career Objective:
_____
_____
_____
_____
_____

XIII. Scholastic Honors and/or Achievements:
_____
_____
_____
_____
_____

XIV. List extracurricular activities you have been involved in and any offices/positions you have served, including, but not limited to non-equine organizations, Student Government, 4-H, FA, AHA, sports and community service organizations.
_____
_____
_____
_____
_____

XV. Arabian Industry Affiliation Describe your background in the Arabian Industry.
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_____

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_____

XVI. Explain how you plan to be involved with the Arabian breed after receiving your college education.

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XVII. Essay, Please attach a typed written one (1) page essay that explains: What are your educational goals and how do you plan to apply your education to the Arabian horse industry upon graduation?

XVIII. Letters of Recommendation Please attach four (4) letters of recommendation displaying your genuine interest in the equine industry and academics.

XIX. Recommendation letters from relatives will not be accepted.

a. One from a horseman or horsewoman.
b. One from an academic teacher or advisor.
c. One from an adult member of your Region 14 Club.
d. One from an employer or clergy or community leader.

Transcript: Please provide a current copy of your high school transcript to include the most current completed semester. Prefer Official Transcript but maybe a copy.

Photographs: Please submit one digital 3x5 inch head/shoulder photograph of applicant and a photograph of the applicant with an equine partner (informal or show photo with photographer permission).

AHA Membership Card: Please submit a copy of a current AHA Membership Card with your completed application.

Agreement and Understanding **Any application that is incomplete** and/or **submitted after JUNE 1, 2026, will NOT be considered for candidacy**.

I certify that the information I have given on this application is true and accurate to the best of my knowledge.

Applicant Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

Checklist: A complete application must include all of the items below.
Application Checklist: _____
Completed, Signed Region 14 Youth Scholarship Application _____
Typed 1 Page Essay _____
Transcript (official or copy) _____
Photographs _____
AHA Membership Card _____
4 Letters of Recommendation Submit one complete, ELECTRONIC application and all the required attachments must be submitted by: **JUNE 1, 2026**.
To be considered. A complete application must include all items listed on the Application Checklist, at the time of submission. Applications dated after **JUNE 1, 2026** will NOT be considered for candidacy.

Mail/EMAIL completed application to: Jeff Caldwell, 585 Flat Shoals Road, Walhalla, SC 29691 or jcaldwell2995@yahoo.com

For additional questions please contact or email:
Jeff Caldwell Cell: 502-468-4953, Email: jcaldwell2995@yahoo.com

Completed, timely submitted applications will be evaluated by the designated youth scholarship committee.

Scholarship payment will be made to the applicants, once proof of payment for tuition and/or books is submitted to the Region Youth Scholarship Chair: Jeff Caldwell.

NOTE: If for any reason a scholarship recipient does not attend his/her intended educational program, he/she forfeits the scholarship.