



CROSS STATE TRAIL RIDE INC

EDUCATION ASSISTANCE FUND APPLICATION

Name _____

Address _____

Telephone _____ E-mail _____

School Attending _____

Date of Graduation _____ Overall Grade Point Average _____

Career you plan to prepare for _____

1. List the following:

Juniors, list extracurricular activities you participate in at school (athletics, band choir) clubs, offices held and school participated in each, etc. If none, please state why.

Juniors and Adults, list extracurricular activities you participate in out of school (volunteer work, clubs, community involvement etc., If none, please state why

Honors or other forms of recognition received in school, at work, or through civic activities

2. What one thing have you learned as a result of your riding experiences and/or association with CSTR

3. PLEASE ATTACH A COPY OF YOUR ACCEPTANCE LETTER FROM THE SCHOOL YOU ARE PLANNING TO ATTEND IF THIS IS THE FIRST YEAR OF APPLICATION

Date _____ Signed _____

MAIL COMPLETED APPLICATION TO

- MARY MCKENNEY, 33 TURKEY HILL RD., WEST NEWBURY, MA 01985