



ROBERT KRUDOP SCHOLARSHIP AWARD

2010

The East End Livestock and Horseman's Association is offering a \$800 college scholarship to any college student from the East End of Long Island whom is currently enrolled in the field of veterinary medicine or any program associated with care or management in animal related fields.

This award is honoring the memory of longtime and loyal EELHA member, Robert Krudop. Bob helped for many years to protect the interests of livestock owners and enthusiasts of Eastern Long Island.

Applications and qualifications are available from any EELHA board member, at any location where this sign is posted, at www.eelha.org, or by writing to the East End Livestock and Horsemen's Association, PO Box 102, Peconic, N.Y. 11958. Applications must be received by Friday, May 21st, 2010

**EAST END LIVESTOCK & HORSEMAN'S ASSOCIATION
ROBERT KRUDOP SCHOLARSHIP AWARD**

Eligibility: Student must :

- 1. Be currently attending an accredited college and be able to show proof thereof**
- 2. Be currently enrolled and majoring in a curriculum in veterinary medicine or any program associated with the care or management in animal related fields.**
- 3. Submit a completed application to EELHA Scholarship Committee at PO box 102, Peconic, NY 11958 by the application deadline.**
- 4. Have strong interest in animals outside of school**
- 5. Provide any supporting documents or letters of recommendation with the application.**

DETERMINATION

- 1. Applications will be reviewed by our Scholarship Selection Committee and submitted on merit to our Board of Directors for voting.**
- 2. Determination will be made at the May Board meeting held on the fourth Thursday of the month.**
- 3. Recipient will be notified by phone of the scholarship award.**
- 4. If there is no eligible applicant, the scholarship money will be applied to the following year making either a larger award or multiple awards to eligible applicants that year.**

Procedure

- 1. Application forms can be obtained from any EELHA board member, or by writing EELHA at PO Box 102, Peconic, NY 11958, or obtained from local businesses where the scholarship is advertised.**
- 2. The recipient will be awarded the scholarship at the annual scholarship dinner in June. The recipient will be the guest of the EELHA**
- 3. Actual monies will be awarded upon proof of continuing education in the above described fields.**

**ROBERT KRUDOP SCHOLARSHIP
APPLICATION FORM**

NAME _____

ADDRESS _____

CITY _____ **STATE** _____ **ZIP** _____

DATE OF BIRTH _____ **PHONE #** _____

CELL # _____ **EMAIL ADDRESS** _____

HIGH SCHOOL _____

CURRENT COLLEGE ATTENDING _____

CITY _____ **STATE** _____ **ZIP** _____

CURRENT GPA _____ (PROVIDE DOCUMENTATION)

ARE YOU CURRENTLY EMPLOYED? YES _____ **NO** _____

HRS PER WEEK _____ **SALARY** _____

**PLEASE LIST ANY AWARDS RECEIVED IN HIGH SCHOOL
AND/OR COLLEGE**

**PLEASE LIST OUTSIDE ACTIVITIES ASSOCIATED WITH YOUR
COLLEGE STUDIES**

PLEASE LIST 3 REFERENCES NOT RELATED TO YOU:

NAME: _____
PHONE _____
ADDRESS _____

NAME: _____
PHONE _____
ADDRESS _____

NAME: _____
PHONE _____
ADDRESS _____