

2024 CVDA Grant Application

Due April 15, 2024

Applicants notified of decision by April 30, 2024

Grant must be used by December 31, 2024

CVDA Member Name: _____ Date of Application: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ E-mail: _____

Age, if under 18: _____

Applicants under 18 years of age must have an adult sponsor. Please provide sponsor information:

Amount of grant request (\$2,000 max.): _____ Years CVDA member: _____

CVDA volunteer history: _____

Other scholarship/grants applied for: _____

Other scholarship/grants received: _____

Summary of your dressage experience and/or event management experience: _____

NOTE: All applicants must read and sign below.

By accepting this grant, I agree to the terms outlined in the CVDA Grant Program description. I understand that, if chosen, I will receive the full grant amount after I attend or organize the educational event. In addition, I understand that I will receive the grant funds *after providing a written account to the CVDA Board, to be received within 30 days of completion of the educational program or event.*

Signature: _____ Date: _____

For more information, contact Terri Satterlee, 802-228-2103 or tfglover@tds.net. Email or send completed application to: Terri Satterlee, P.O. Box 286, Ludlow, VT 05149.

Are you applying for a grant to SUPPORT an educational event? Please complete Page 2.

Are you applying for a grant to ATTEND an educational event? Please complete Page 3.

IMPORTANT: Application must be received by CVDA no later than 30 days prior to the event.

Application for a Grant to SUPPORT an Educational Event

Benefit of your proposed program to CVDA membership at large: _____

Describe the educational or instructional event to be conducted (be specific): _____

Location and date(s) of the event: _____ Event manager: _____

Describe the facilities available at this location: _____

Name and qualifications of the instructor(s) or clinician(s): _____

How will this educational event help the participants? What is the need for this program? _____

How many people will participate in this event? Riders: _____ Auditors: _____ Classroom students: _____

How will participants be selected for this event? What levels of riders will participate? Who is the desired audience?

What is the cost per participant? CVDA members: _____ Non-members: _____

What is the plan for including auditors? _____

Other information regarding this event that you believe will be helpful for the CVDA Board of Directors: _____

Please attach a complete budget for the event/program, including all estimated expenses and income.

Please send Pages 1 and 2, with an attached budget, to Terri Satterlee (see contact information on Page 1).

Application for a Grant to ATTEND an Educational Event

What educational program are you requesting grant assistance to attend? _____

Instructor(s): _____

Location: _____ Date(s): _____

Goal of program: _____

Please attach a detailed budget of the costs you will incur by attending this event/program (and attach program documentation if available).

Briefly summarize your dressage experience: _____

What is your primary purpose in attending this program? _____

Which skills do you hope to gain or improve? _____

Are you currently a dressage instructor? _____ If yes, how long have you been teaching? _____

If yes, what is the average skill level of your students? _____

If you are attending a certification or licensing program, do you plan to test? _____ If yes, when? _____

Other information on your goal to attend this program that will be helpful to the CVDA Board of Directors: _____

Please attach the budget requested above plus two letters of recommendation from those who can attest to your riding, teaching and/or training abilities. Please send Pages 1 and 3, and requested documentation, to Terri Satterlee (see contact information on Page 1).