

Continuing and Professional Studies Office

## Roy Dye '39 Financial Assistance Program Application Form

Full Name \_\_\_\_\_ Email \_\_\_\_\_

Addr1 \_\_\_\_\_ Addr2 \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Country \_\_\_\_\_ Telephone \_\_\_\_\_

Employed by or Volunteer at \_\_\_\_\_

Currently enrolled at Texas A&M University:  Yes  No

Education:  BS/BA  MS  Doctorate

Credentials:  PT  OT  SLP  Therapeutic Riding  
 Psychologist / Psychiatrist  None

Credentialing Organizations:  NARHA  
 CANTRA  
 AHA  
 EFP  
 Other

Background in equine facilitated activities and theory:

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In a separate letter, please explain your reasons for requesting financial assistance. Also provide two (2) letters from individuals who can support your request.

Explain career goals:

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I am interested in:  Equine Facilitated Psychotherapy  Foundations of Hippotherapy  Horse Care  Therapeutic Riding

### HOW TO SUBMIT YOUR REQUEST FOR FINANCIAL ASSISTANCE\*

Fax to: Continuing and Professional Studies Office, 979-845-6407, ATTN: Business Coordinator

Scan and email to: Continuing and Professional Studies Office, capso-epay@tamu.edu

Mail to: Continuing and Professional Studies Office (*see address below*), ATTN: Business Coordinator

\*Please include all supporting documents: your letter, two letters supporting your request.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date