#### John W. Scott Memorial Scholarship

#### **Instructions for Applicants**

- 1. Please include the following with completed application:
  - A. An essay (250-word minimum, typed and double spaced) Student's name should be included on each page of the essay.

Essay Topic: Describe your career goals and explain how the John W. Scott Memorial Scholarship will impact your ability to achieve those goals.

- B. An ACCEPTANCE LETTER from an accredited College, University, or Technical College
- 2. Two (2) <u>LETTERS OF RECOMMMENDATION</u> to be completed and submitted by **one teacher** and one person in your community **not affiliated** with your high school. **This is in addition to the Recommendation Form included in the packet.**
- 3. The completed application must be postmarked by Aril 14, 2023. Please refer to the Scholarship Application Checklist to ensure the packet is accurate and complete before mailing. Incomplete or late applications will not be considered.
- 4. Applications will be screened according to the following criteria:
  - A. Evidence of financial need
  - B. Class ranking and GPA]
  - C. Recommendations
  - D. Curricular and Extra-Curricular activities
- 5. Send completed applications with enclosures to:

John W. Scott Memorial Scholarship Committee

201 Lincolnshire Boulevard

Columbia, SC 29203

## John W. Scott Memorial Scholarship Application

#### **SCHOLARSHIP APPLICATION**

Name:	Telephone Number:
Address:	City:
State:	Zip Code:
E-mail Address:	
Name of School Counselor:	
College/University Applicant Plans to Attend:	
Acceptance Date:	Intended Major:
Mother's Name:	Occupation:
Father's Name:	Occupation:
Please indicate parents' yearly income before taxes.	
Mother's Income: \$	
Father's Income: \$	
Total Income: \$	

# List name(s) and age(s) of all dependent children in your family: Name: Age: Please give the names, addresses and telephone numbers of the two persons completing the recommendation forms. (Family members should not serve as either of your references) 1. Name: \_\_\_\_\_ Telephone Number: \_\_\_\_\_ E-mail Address: Address: \_\_\_\_\_ 2. Name: \_\_\_\_\_ Telephone Number: \_\_\_\_\_ E-mail Address: I hereby declare that the information contained in this application is accurate and complete to the best of my knowledge. Applicant Signature: \_\_\_\_\_ Parent Signature:

### **Club/Organization Form**

List all school, community and religious club, organization and activities you have been involved in since your freshman year. A sponsor's signature is required for verification and credit.

Club Name	Dates Involved	Office Held	Year(s) Office Held	Signature

List all honors and awards received from school and community clubs, organizations and activities. Counselor's or Sponsor's signature required for verification and credit.

Honor or Award	Date of Honor or Award	Signature

## **Recommendation Form**

### (Teacher)

Applicant's Name:				
How well do you know the app	olicant?			
Very well (More than	one year)			
Fairly well (More than	n one semester)			
Not very well (Less th	nan one semester)			
Please evaluate the applicant of best describe the applicant in check only one response for each	relation to studen	•		
	Not Observed	Below Average	Average	Above Average
Make friends easily				
Shows concern for others			<del></del>	
Positive influence on others			<del></del>	
Communicates effectively				
Exemplifies good conduct			<del></del>	
Strong desire to achieve				
Sets high academic standards				
Accepts responsibility				
Influences others positively				
Briefly explain why you think t	his applicant shou	ıld receive this schola	arship award	

Teacher's Name:	
E-Mail Address:	
Telephone Number:	
Teacher's Signature:	

## **Recommendation Form**

### (Community Individual)

Applicant's Name:				
How well do you know the ap	plicant?			
Very well (More than	one year)			
Fairly well (More tha	n one semester)			
Not very well (Less th	nan one semester)			
Please evaluate the applicant best describe the applicant in check only one response for e	relation to studen	·		
	Not Observed	Below Average	Average	Above Average
Displays community interest				
Is a positive role model				
Eagerly volunteers to assist				
Exhibits good character				
Communicates effectively				
Shows concern for others				
Accepts responsibility				
Positive influence on others				
Exhibits strong leadership				
Explain briefly why you think t	he applicant shou	ld receive this schola	rship award	

Evaluator's Name:	
E-Mail Address:	
Telephone Number:	
Evaluator's Signature:	

#### **Scholarship Application Checklist**

Please verify your application is accurate and complete by ensuring all information listed below is included in your packet when mailed.

- ✓ Application signed and all information complete
- ✓ Letters of recommendation enclosed, signed, and completed by a teacher and an individual in the community
- ✓ 250-word minimum essay (typed and double spaced) enclosed. Student's name should be on
  each page of the essay
- ✓ Acceptance letter from an accredited college, university, or technical college enclosed
- Club/Organization form completed with dates of participation and all activities signed by your school counselor or sponsor (If the space allocated on the application is insufficient to list all activities and honors, you may include an enclosure to document those items)
- ✓ Official transcript enclosed including class rank and GPA

Reminder: Completed applications must be postmarked by April 14, 2023 to be considered for the scholarship award. Incomplete or late applications will not be considered.