

**CRITERIA FOR SCHOLARSHIPS, LOANS AND GRANTS  
THE STROM THURMOND FOUNDATION, INC.  
P.O. BOX 50214  
COLUMBIA, S.C. 29250**

The Trustees of the Strom Thurmond Foundation have adopted the following criteria for the selection of recipients for scholarships, loans and/or grants from the Foundation.

**The basic criteria shall be *worthiness* and *need*.**

In weighing the relative *need* for the applicants, the following matters shall be considered.

1. Family income (proof of income shall be from the front page of current S.C. taxpayer return to be included with application).
2. Individual income of applicant (if applicable also front page of S.C. taxpayer return).
3. Family's total financial requirements (i.e. number of dependents supported, etc.).
4. Other outside assistance available to applicant (i.e. grants or loans, etc.).
5. Applicant's physical and experience qualifications for part-time work.

In weighing the relative *worthiness* of the applicants, the following matters shall be considered.

1. Past academic record. High school graduates must be in the top fifty percent of the class. Students already enrolled in college must have a **2.5 G.P.R.** out of a possible 4.0.
2. Sense of responsibility demonstrated.
3. Probabilities of completing educational course.
4. General attitude toward further educational accomplishments.
5. Demonstrated diversification of interests which would indicate future civic contribution.
6. The moral fitness of the applicant.

**Educational assistance is limited to those students who are residents of the State of South Carolina attending South Carolina schools working towards a first time undergraduate degree, or for vocational courses on the high school or post-high school level.**

New applications must be received by **MARCH 1<sup>st</sup>**. Grants are made by semester and a renewal request for assistance must be made each semester. Renewal requests must be received by December 1 to be considered for the spring term and no later than June 1 for the fall term.

Each applicant shall submit to the Trustees of the Strom Thurmond Foundation an **application** on a form furnished by the Trustees, together with a **personal letter** to the Trustees, written personally by the applicant, setting forth the circumstances which prompt the application for financial assistance for educational pursuits and a **transcript** of grades, (including class standing if high school senior). No incomplete application will be considered.

Personal interviews of applicants by the Trustees may be requested by the Trustees at their discretion.

**Please note deadlines. Renewals do not require a new application  
only a written request together with transcripts.**

APPLICATION FOR EDUCATIONAL ASSISTANCE FROM  
THE STROM THURMOND FOUNDATION

1. NAME \_\_\_\_\_ TELEPHONE# \_\_\_\_\_  
ADDRESS: HOME \_\_\_\_\_ CITY & ZIP \_\_\_\_\_  
SCHOOL ATTENDING \_\_\_\_\_ TELEPHONE# \_\_\_\_\_  
PLACE OF BIRTH \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

a. FATHER'S NAME \_\_\_\_\_ LIVING? YES\_ NO\_ AGE \_\_\_\_\_  
ADDRESS \_\_\_\_\_ TELEPHONE# \_\_\_\_\_  
OCCUPATION \_\_\_\_\_ ANNUAL INCOME \_\_\_\_\_  
WHERE EMPLOYED \_\_\_\_\_

b. MOTHER'S NAME \_\_\_\_\_ LIVING? YES\_ NO\_ AGE \_\_\_\_\_  
ADDRESS \_\_\_\_\_ TELEPHONE# \_\_\_\_\_  
OCCUPATION \_\_\_\_\_ ANNUAL INCOME \_\_\_\_\_  
WHERE EMPLOYED \_\_\_\_\_

c. LIST OF BROTHERS AND SISTERS:

NAME	AGE	RELATIONSHIP
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

d. INFORMATION TO BE SUPPLIED BY MARRIED OR INDEPENDENT APPLICANTS:

SPOUSE'S NAME \_\_\_\_\_ LIVING? YES\_ NO\_ AGE \_\_\_\_\_  
ADDRESS \_\_\_\_\_ TELEPHONE# \_\_\_\_\_  
OCCUPATION \_\_\_\_\_ ANNUAL INCOME \_\_\_\_\_  
WHERE EMPLOYED \_\_\_\_\_  
IF YOU WORK LIST YOUR PLACE OF EMPLOYMENT AND INCOME: \_\_\_\_\_  
\_\_\_\_\_

2. EDUCATION INSTITUTIONS ATTENDED:

\_\_\_\_\_ GRADUATE? DATE \_\_\_\_\_  
\_\_\_\_\_ GRADUATE? DATE \_\_\_\_\_  
\_\_\_\_\_ GRADUATE? DATE \_\_\_\_\_  
YOUR CLASS STANDING AS A HIGH SCHOOL GRADUATE \_\_\_\_\_  
YOUR GPA \_\_\_\_\_

EXTRA CURRICULAR ACTIVITIES:

SPORTS \_\_\_\_\_ LETTER? \_\_\_\_\_

ORGANIZATIONS (SCHOOL) \_\_\_\_\_

ORGANIZATIONS (OTHER) \_\_\_\_\_

3. OFFICES HELD (SCHOOL, CHURCH, COMMUNITY)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. HONORS RECEIVED

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. EDUCATIONAL COURSE TO BE PURSUED \_\_\_\_\_

6. NAME OF INSTITUTION(S) TO WHICH APPLIED \_\_\_\_\_

HAVE YOU BEEN ACCEPTED? \_\_\_\_\_ BY WHICH INSTITUTION(S)? \_\_\_\_\_

WHICH DO YOU PLAN TO ATTEND? \_\_\_\_\_

7. WHAT RESOURCES OF INCOME DO YOU HAVE TO APPLY AGAINST EDUCATION COSTS? \_\_\_\_\_

WHAT OTHER SCHOLARSHIP ASSISTANCE HAVE YOU APPLIED FOR? \_\_\_\_\_

AMOUNT YOU EXPECT TO RECEIVE OR WILL BE RECEIVING FROM OTHER SCHOLARSHIP AWARDS

PELL GRANT? \_\_\_\_\_ AMOUNT \_\_\_\_\_

PART TIME WORK OR WORK STUDY? \_\_\_\_\_

8. ARE YOU ELIGIBLE FOR ANY TYPE OF GOVERNMENT ASSISTANCE (VA, SOCIAL SECURITY, ETC.)?

9. REFERENCES:

NAME	ADDRESS	TELEPHONE
_____	_____	_____
_____	_____	_____
_____	_____	_____