



South Carolina Troopers Association 2024 Application for Scholarship



All sections of this application must be filled out completely to be considered for a scholarship from the South Carolina Troopers Association. Please read the following information carefully before completing application:

To be eligible you must be:

- An Active, Retired, Associate, or Life Member in good standing; or
- A legal dependent (defined as a natural or adopted child, under the age of 25, for whom the member provides more than half of their support, or a child for whom the member provides more than 50% support) of an SCTA member in good standing; or
- The surviving spouse or dependent of a trooper killed in the line of duty provided the trooper was a member in good standing at the time of the incident.

PLEASE TYPE OR PRINT YOUR APPLICATION LEGIBLY

All applications for scholarships must be received via mail, hand delivery, or PDF (office@sctroopers.org) by the SCTA Office by **4:00 p.m. on Friday, March 29, 2024.**

You will need to include the following information **along with your completed application:**

- Copy of certificate of admission from the school you plan to attend. *If you have not received this, you may submit a copy of the letter from the institution you will be attending* indicating you have applied for admission.
- Copy of SAT and/or ACT score(s). If you do not have a copy, have your high school counselor verify your scores.
- If currently enrolled in a college or university, attach most recent transcript.
- Completed Essay. (See page 2 for question). Essay must be **typed and double-spaced. Fonts should not exceed 15, and a minimum word count of 500 is required** to meet qualifications.

Completed applications and attachments should be mailed to the SCTA Office and addressed as follows: SCTA Scholarship Fund; 4961 Broad River Road; Columbia, SC 29212 OR e-mailed via PDF to office@sctroopers.org. *Incomplete applications will not be considered for scholarship awards.*

Thank you for applying, and Good Luck! If you have any questions, please contact the SCTA Office at (800) 633-2236 or e-mail dianerollison@sctroopers.org.



South Carolina Troopers Association 2024 Application for Scholarship



PART I. APPLICANT INFORMATION

NAME:

First

Middle Initial

Last

PERMANENT ADDRESS:

Street Address

City

State

ZIP

TELEPHONE : (_____) _____ - _____

E-MAIL: _____

If applicable

PART II. MEMBERSHIP

Is SCTA Member your: Parent Guardian Self

Member's Status: Active Retired Associate Life

SCTA Member's Name: _____

Member Since: _____/_____

Month Year

PART III. ESSAY

The topic for this year's essay is:

How has your involvement in public service and community initiatives influenced your personal growth, and how do you envision leveraging your education to continue making a positive impact in your community?

*Please attach your essay to the back of this application. If reference materials are used, please include a bibliography or be sure to reference within the essay. Essays must be typed and double-spaced. A font size in excess of 15 will not be considered. **The minimum length of the essay is 500 words.** Minimum qualifications must be met, or the application will be disqualified.*

FOR OFFICE USE ONLY:

Date Received _____

Application Number 2024- _____

Essay Number 2024- _____

Notes: _____



South Carolina Troopers Association 2024 Application for Scholarship



PART IV. EDUCATION

In order for the Scholarship Committee to get to know you better, please use the space below to tell us about the educational program you plan to pursue at the college or university you are/will be attending.

PART V. HONORS, AWARDS, ETC.

Please list any honors, achievements, awards, etc., that you have received in high school, college, and/or the community.

PART VI. WORK HISTORY

Please list below any part-time, full-time, or volunteer work you have completed in the past four years.

Employer/Organization & Location (City): _____

Dates Worked From _____ / _____ **To:** _____ **Hours per week:** _____

Duties: _____

Employer/Organization & Location (City): _____

Dates Worked From _____ / _____ **To:** _____ **Hours per week:** _____

Duties: _____

(If you need more space, please attach a separate sheet of paper.)

Application Number 2024-_____



South Carolina Troopers Association 2024 Application for Scholarship



PART VII. BIOGRAPHICAL

In the space below, please include a SHORT biographical sketch. This information will be used for publication purposes if you are selected as a scholarship recipient. (If you need additional space, please attach a separate piece of paper)

PART VIII. SCHOLARSHIP/FINANCIAL AID

Please list any scholarship, financial aids, grants, etc. in addition of any anticipated financial aid and/or scholarships for the year in which you are applying for this scholarship.

<u>Name of Scholarship/Financial Aid</u>	<u>Amount of Award</u>	<u>Date(s) Received</u>
--	------------------------	-------------------------

PART IX. ADDITIONAL INFORMATION

On a separate page, please indicate any additional information relevant to your future goals in education.

Before you mail this application, please be sure you have completed the application in its entirety and be sure to include all attachments as indicated on Page 1.

GOOD LUCK!

Application Number 2024-_____