

2018-2019 PSSCA Scholarship

**Application is due by March 31, 2019**

**Winners will be selected and notified by April 15, 2019**

The Palmetto State School Counselor Association awards three high school seniors a $1,000.00 non-renewable scholarship to assist with post-secondary education costs.

Eligibility:

* Must be a high school senior attending a public or private secondary school in the state of South Carolina.
* Must be a permanent resident of the state of South Carolina.
* Must plan to attend a post-secondary institution during the 2019-2020 school year.

Applicants must:

* Submit an application.
* Complete an essay of no more than 500 words about a school counselor who has made a difference in your academic, career, social, and/or emotional development. You may additionally include your career goals, post-secondary education plans, and an explanation for how the scholarship will help you.
* Include an official copy of high school transcript.
* Submit a letter of recommendation.
* A copy of your admission letter or another form of verification of acceptance to college, university, technical school, or training center must be provided before receiving funds.

Criteria for selection:

* Essay
* High school academic record
* Community service, and school activities
* Letter of recommendation (non-family member)

**Palmetto State School Counselor Association’s**

**“How a School Counselor Made the Difference” Scholarship**

# Student Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Name(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Parent/Guardian Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## College/University I plan to attend \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you been accepted? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Intended Major \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you the first person in your family to go to college? YES \_\_\_\_ NO \_\_\_\_

What do you plan to do after you complete your college education? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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A. List any academic honors, awards and membership activities while in high school.

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B. List your hobbies, outside interests, extracurricular activities and school related volunteer activities.

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C. List your non-school sponsored volunteer activities in the community.

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We certify that the information given on this application is correct.

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Signature of Applicant & Date Signature of Parent/Guardian & Date

**Please mail completed application and all supporting documents to:**

**Dr. Crissy Roddy**

**176 Park Place Circle**

**Lexington, South Carolina 29072**