

CHARLESTON COUNTY WOMAN'S AUXILIARY

**H. H. Dayson Scholarship**

SCHOLARSHIP GUIDELINES

1. Scholarship from Charleston County woman's Auxiliary will be given to deserving students enrolled at any (4) four year college.
2. Applicants must be full-time students academically sound; grade point average must be 2.5 or higher.
3. Applicant must be a member of Charleston County churches, application will be given to the Missionary Ministry president of the given church
4. Recipients will be selected by the scholarship committee and will be determine by the committee and the president of Charleston County Woman Auxiliary.
5. The scholarship selection will be based on financial need, and his/her desire to succeed.
6. All completed applications are to be submitted to the chairperson of the Scholarship Committee on or by June 30<sup>th</sup> of the given year.
7. Each year the Scholarship will be given in the amount of \$500.00.

CHARLESTON COUNTY WOMAN'S AUXILIARY

Application for Woman's Auxiliary Scholarship

Direction: Please type or print in ink (blue/black only) and complete all items.

**Mail to: Mrs. Carolyn McCoy 440 Race Street Charleston S C 29403**

**Personal Data**

Name \_\_\_\_\_

Address \_\_\_\_\_

Social Security \_\_\_\_\_ Date of Birth \_\_\_\_\_

Age \_\_\_\_\_ Sex \_\_\_\_\_ Telephone \_\_\_\_\_

High School Attended \_\_\_\_\_ Date of Graduation \_\_\_\_\_

College Attending \_\_\_\_\_ Classification \_\_\_\_\_

Name of parent(s) Guardian

Father \_\_\_\_\_ Occupation \_\_\_\_\_

Mother \_\_\_\_\_ Occupation \_\_\_\_\_

Academic Data (please have high school transcript mailed to the committee).

Give name any/all Colleges of which you have applied.

1. \_\_\_\_\_ Accepted? Yes No
2. \_\_\_\_\_ Accepted? Yes No
3. \_\_\_\_\_ Accepted? Yes No

Have you decided on a Major or Minor? If so what, \_\_\_\_\_

List all honors, school and community activities and years in which you serve.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**CHURCH MEMBERSHIP**

Name of church \_\_\_\_\_

Address \_\_\_\_\_

Pastor \_\_\_\_\_

Are you a member of Church Sunday School? Yes \_\_\_\_\_ No \_\_\_\_\_

Church Association \_\_\_\_\_ Moderator \_\_\_\_\_

List all/any Congress Association, Convention and, religious organization you attended.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**ESSAY**

Submit 250-500 word essay entitled: “Why I Am Furthering My Education and How Will My Christian Background Help Me Achieve My Goal”.

**FINANCIAL RESOURCES**

How much will you receive from the following sources toward your educational expenses?

Student’s earning and savings \$ \_\_\_\_\_

Parents or Relatives \$ \_\_\_\_\_

Scholarships \$ \_\_\_\_\_

Loans \$ \_\_\_\_\_

Total \$ \_\_\_\_\_

**LETTERS OF RECOMMENDATIONS**

Please submit three (3) letters of recommendations from individual who knows you best and your involvement at church, school and community; one from pastor, and missionary president.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

Signature of Pastor \_\_\_\_\_ Date \_\_\_\_\_