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.I.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 1st**. 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:

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   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:

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