



# COMMUNITY FOUNDATION OF THE LOWCOUNTRY, INC.

## **The British Open Pub College Scholarship Program Scholarship Guidelines & Instructions**

### **PURPOSE**

The British Open Pub College Scholarship Fund was established at the Community Foundation in 2004 by the owners of the British Open Pub to support the British Open Pub College Scholarship Program.

The purpose of this Scholarship Program is to assist qualified students in pursuit of a post-secondary education who have shown outstanding academic and community achievements and plan to successfully complete a course of study at an accredited college or university. Preference may be given to students who have not been selected as recipients of other scholarship awards.

### **ELIGIBILITY/CRITERIA**

- A. Applicant must be a high school senior scheduled to graduate in the spring of the current school year from a high school on Hilton Head Island or in Bluffton, SC.
- B. Applicant must be a U.S. citizen and legal resident of Beaufort County, South Carolina.
- C. Applicant must demonstrate financial need based on the applicant's and applicant's parent(s) or guardian(s) federal tax returns for the **last two years**, and a completed FAFSA (Free Application for Federal Student Aid) form.
- D. Applicant must have a cumulative grade point average of at least 3.0 on a 4.0 scale.
- F. Applicant must have plans to successfully complete a course of study at an accredited college or university.
- G. Applicant must have achieved and be able to show evidence of outstanding academic and community accomplishments.

### **APPLICATION PROCEDURE**

**Submit all application materials by Friday, April 23, 2010. Application materials should include:**

- A. A completed **British Open Pub College Scholarship Application Form** (available at the Community Foundation of the Lowcountry office and high school guidance office).
- B. A *certified* copy of the applicant's most recent transcript(s) showing grades for at least the last two years.
- C. A copy of the applicant's and the applicant's parent(s) or guardian(s) federal tax returns for the last **two** tax years (current and previous year).
- D. Free Application for Federal Student Aid (FAFSA) - showing your Expected Family Contribution (number), or a written statement of why you did not apply for this Federal Aid.

- E. A typed essay (1,000 - 2,500 words) regarding how this scholarship will assist you in achieving your academic and career goals.
- F. **Three Recommendation Forms** completed by an employer, family member, current teacher, or school personnel explaining the applicant's ability to successfully complete a course of study at an accredited college or university.
- G. Each applicant must attend a personal interview with the British Open Pub College Scholarship Advisory Committee (Scholarship Advisory Committee) if chosen as a finalist.

### **SELECTION OF RECIPIENTS**

- A. The Scholarship Advisory Committee, composed of up to five members, shall select scholarship recipients (subject to approval by Community Foundation of the Lowcountry Board of Trustees).
- B. Scholarship funds will be awarded to cover educational costs, including but not limited to, tuition/fees, room and board, and books. Specific costs to be covered will be at the discretion of the Scholarship Advisory Committee.
- C. Scholarships are awarded without regard to race, sex, religion, age or national origin.

### **ANNOUNCEMENT OF SCHOLARSHIP AWARDS**

- A. The Community Foundation of the Lowcountry will send an official award letter and related information to each recipient.
- B. A public announcement of scholarship recipients will be arranged by the Community Foundation of the Lowcountry.
- C. Recipients may be further recognized through Awards Day programs at their schools.

### **DISTRIBUTION OF SCHOLARSHIP FUNDS**

- A. The Scholarship Advisory Committee or Community Foundation staff members will advise all scholarship recipients regarding how the scholarships will be paid and review the students' responsibilities to the British Open Pub College Scholarship Program. These responsibilities include sending transcripts at end of the year, and providing notification of all address changes or if the recipient drops out of school.
- B. In accordance with the Community Foundation's policy, scholarship funds will be paid in the form of a check made payable to the college/school of the scholarship recipient. Checks will be mailed to the college/school on pre-established dates and notification of payments will be sent to scholarship recipients.

#### **Mail Application and Required Attachments by Friday, April 23, 2010 to:**

**Community Foundation of the Lowcountry, Inc.**

**4 Northridge Drive, Suite A**

**Post Office Box 23019**

**Hilton Head Island, SC 29925-3019**

**Attn: British Open Pub Scholarship**



COMMUNITY FOUNDATION OF THE LOWCOUNTRY, INC.

BRITISH OPEN PUB COLLEGE SCHOLARSHIP APPLICATION
FOR THE 2010-2011 ACADEMIC YEAR

Purpose:

The purpose of the British Open Pub College Scholarship Program is to assist qualified students in pursuit of a post-secondary education who have shown outstanding academic achievement and plan to successfully complete a course of study at an accredited college or university.

General instructions to applicant:

All sections of this application must be completed in order to be eligible for consideration by the British Open Pub College Scholarship Advisory Committee. In addition, the following attachments are required along with your completed application:

- 1.) Certified high school transcript, including SAT/ACT scores.
2.) FAFSA (Free Application for Federal Student Aid) results.
3.) Required Essay on how this scholarship will assist you in achieving your academic and career goals.
4.) Current and last year's Federal Tax Returns for you and your parent(s)/guardian(s).
5.) Three Recommendation Forms completed by an employer, family member, current teacher, or school personnel.

1. Personal Information

Full name of applicant \_\_\_\_\_ Nickname \_\_\_\_\_
Home telephone number \_\_\_\_\_ Email address \_\_\_\_\_
Present home address \_\_\_\_\_
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_
Number of years lived in Beaufort County \_\_\_\_\_ Citizenship \_\_\_\_\_
Date of birth \_\_\_\_\_ Social Security Number \_\_\_\_\_

2. Family Information

Mother's name \_\_\_\_\_ Father's name \_\_\_\_\_
Occupation \_\_\_\_\_ Occupation \_\_\_\_\_
Street address \_\_\_\_\_ Street address \_\_\_\_\_
City, State, Zip \_\_\_\_\_ City, State, Zip \_\_\_\_\_
Phone number \_\_\_\_\_ Phone number \_\_\_\_\_

Name and ages of siblings/other dependents. Indicate what school(s) they attend.

Table with 4 columns: Name, Relationship, Age, School or college/years attended. Includes three rows of blank lines for data entry.

### 3. Education

a. Name all secondary and/or technical schools you have attended in the last five years. List the school you are presently attending first.

---

---

b. How many years do you plan to attend college, and what course of study would you like to pursue?

---

---

c. What future business or educational career will you likely pursue after finishing college?

---

---

d. What college(s) would you most like to attend? Please explain your reason.

---

---

---

---

e. What colleges have you applied to for admission? Please indicate acceptance status.

---

---

f. List scholarships, grants or loans for which you have applied, and check the ones you plan to use. Indicate funding amount you will receive.

Name	Amount Requested / Awarded	√ if you will use
------	----------------------------	-------------------

---

---

---

---

### 4. Academic, athletic, service, and extra activities

Use additional pages or attach resume for sections 4a, 4b, and 4c.

a. List academic awards, achievements and dates.

---

---

---

---

---

---

**b. List your participation in athletic activities.**

---



---



---

**c. List your participation in community service and extra-curricular activities.**

---



---



---

**5. Employment History**

List jobs you have held in the last three years.

**Employer                      Dates                      Hours per week                      Position                      Salary**

---



---



---

**6. Your Expected ANNUAL Cost of College:**

Please provide the following information for each school you have selected.

<b>ANNUAL EXPENSES-\$</b>	<i>College</i>	<i>College</i>	<i>College</i>	<i>College</i>
<i>Tuition</i>				
<i>Room/board</i>				
<i>Books/supplies</i>				
<i>Clothing/personal</i>				
<i>Entertainment</i>				
<i>Transportation</i>				
<b>Total Annual Costs</b>				
<b>(Less Scholarships or Grants Received)</b>	(            )	(            )	(            )	(            )
<b>Total Projected Costs</b>				

### 7. Financial Need Summary

a. Complete this section regarding Estimated Combined Net Income of you and your parent(s) or guardian(s) for the current year. Please attach a copy of the current year and prior year Federal Income Tax returns for you and your parent(s)/guardian(s).

Name of person	Income and year	Total annual income \$\$

b. Have you filed a FAFSA (Free Application for Federal Student Aid)? Please submit a returned copy showing your EFC (expected family contribution).

\_\_\_\_\_

c. If you plan to attend a college or university in South Carolina have you applied for scholarship funding through the South Carolina Commission on Higher Education: Life, Hope or Palmetto Scholarship Programs? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please list the scholarship and the anticipated amount or award you expect to receive.

\_\_\_\_\_

If no, please indicate why you have *not* submitted an application.

\_\_\_\_\_

### 8. Transcript History

This section is to be completed by your principal or guidance counselor. Attach a certified transcript of the student's high school record to this sheet.

Ranking in senior class \_\_\_\_\_ of \_\_\_\_\_

GPA \_\_\_\_\_ on a \_\_\_\_\_ scale

Best Combined SAT Score: Verbal \_\_\_\_\_ Math \_\_\_\_\_ Writing \_\_\_\_\_

Best ACT Score: Date \_\_\_\_\_ Score \_\_\_\_\_

Signature of principal or guidance counselor \_\_\_\_\_

I do state the above information is accurate and true to the best of my knowledge.

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

**Mail Application and Required Attachments by Friday, April 23, 2010 to:**

**Community Foundation of the Lowcountry, Inc.  
4 Northridge Drive, Suite A  
Post Office Box 23019  
Hilton Head Island, SC 29925-3019  
Attn: British Open Pub Scholarship**



# COMMUNITY FOUNDATION OF THE LOWCOUNTRY, INC.

## The British Open Pub College Scholarship Program Recommendation Form

### PURPOSE

The purpose of the British Open Pub College Scholarship Program is to assist qualified students in pursuit of a post-secondary education who have shown outstanding academic and community achievements and plan to successfully complete a course of study at an accredited college or university. Applicants must meet the following criteria in order to be eligible: demonstrate financial need, have a cumulative grade point average of at least 3.0 on a 4.0 scale, and show evidence of outstanding academic and community accomplishments.

Your recommendation is needed as part of the application process. Please complete this form and return it by **Friday, April 23, 2010** to the Community Foundation of the Lowcountry, Inc. at the address listed below.

### **To be Filled Out by Applicant**

Name of scholarship applicant: \_\_\_\_\_

Applicant's home address: \_\_\_\_\_

School applicant will attend this fall: \_\_\_\_\_

### **To be Filled Out by Reference**

In what capacity have you known the applicant?

\_\_\_\_\_ Student    \_\_\_\_\_ Employee    \_\_\_\_\_ Other (specify) \_\_\_\_\_

Please use the back of this form (or attach a separate sheet) to write a recommendation for the applicant listed above, keeping in mind the purpose of the scholarship program as mentioned above. **Please include your evaluation of the applicant's academic and leadership skills, community involvement, and why he/she should receive funding from this scholarship program.**

Signed \_\_\_\_\_

Title \_\_\_\_\_

Address \_\_\_\_\_

Daytime Phone \_\_\_\_\_

**Return this form by Friday, April 23, 2010 to:**

**Community Foundation of the Lowcountry  
4 Northridge Drive, Suite A  
Post Office Box 23019  
Hilton Head Island, SC 29925-3019  
ATTN: British Open Pub Scholarship**