

Guy Daniels Memorial Scholarship

Program Criteria and Conditions:

1. The Scholarship Committee of the Guy Daniels Memorial Fund awards this scholarship. Completion of the application authorizes the Guy Daniels Memorial Fund Scholarship Committee to verify any of the information given in the application.
2. Scholarships will be awarded to Horry and Georgetown County residents who will be undergraduate students in the 2009-2010 school year.
3. Any awarded scholarship funds are to be used strictly for tuition, books and course-related expenses and will be made payable jointly to the recipient and the academic institution in which he or she shall be properly enrolled.
4. This scholarship may be a continuing scholarship but is not guaranteed to be a continuing scholarship. The recipient of this scholarship will be permitted to submit a scholarship application each year. The maximum scholarship is four consecutive years.
5. Two (2) letters of recommendation must be submitted with the application. These letters should be from someone other than a relative.
6. A transcript of high school or college records must also be submitted with the application.
7. Attach a wallet-size photo to the application form.
8. All applications must be received *no later* than March 18, 2009.
9. Please return application and required information to your school guidance counselor OR directly to Guy Daniels Memorial Fund, PO Box 14134, Surfside Beach, SC 29587.

The following forms and information must be submitted no later than March 18, 2009, for the application to be considered. Please assemble in the following order:

- ♦ Completed Guy Daniels Memorial Scholarship application with wallet-sized photo stapled in upper right corner
- ♦ Transcript of high school and/or college records
- ♦ Two letters of recommendation

Scholarship recipients will be notified prior to graduation by the Guy Daniels Memorial Fund Scholarship Committee

Guy Daniels Memorial Scholarship Application

...Please Print or Type...

Name _____

SS # _____

Address _____

Telephone _____ Date of Birth _____

College Attended, if applicable _____

Years _____ Major _____

High School Attended _____

Graduation Year _____ Class Rank _____ In Class of _____

SAT or ACT(circle one) Scores: Verbal _____

Math _____ Total _____

College You Plan to Attend

Course of Study/Major Planned _____

GPA: 10th grade _____ 11th grade _____ 12th grade _____ College Fresh. _____ Soph. _____ Jr. _____

of Siblings _____ # Siblings in College _____ # of Children Dependent upon Parents _____

List special academic honors or achievements earned in high school: _____

List community and school service activities: _____

List any other scholarships you expect to receive and amount: _____

Please list any other relevant information or special circumstances for consideration: _____

On the back of this Application form, please tell us in your own words why you feel you should receive this scholarship and what it will mean to you if you are selected as the recipient.

I authorize the Guy Daniels Memorial Fund Scholarship Committee to verify any information contained in this application. I understand that all financial information will be shredded unless otherwise instructed by me.

Signed _____ Date _____

PLEASE
STAPLE
PHOTOGRAPH
HERE

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Guy Daniels Memorial Fund, PO Box 14134, Surfside Beach, SC 29587
and received no later than March 18, 2009, for consideration*