



# South Carolina Society of Accountants Scholarship Foundation Application

Eligibility: Applicant must be a full-time student majoring in accounting with a "B" or better grade average in their accounting subjects and at least a "C" average in the remainder of courses. Applicants must be residents of South Carolina. Scholarships will be awarded on the basis of academic achievement, financial need and demonstrated leadership ability.

Deadline: All applications must be received by the Scholarship Foundation of the South Carolina Society of Accountants no later than May 30.

Directions: Complete this application and send it with all supplemental documents (transcripts and recommendation letters) to the South Carolina Society of Accountants, 1215 Anthony Avenue, Columbia, SC 29201, telephone: 803-540-7521.

An official transcript from each school attended and a recommendation letter from the head of the accounting department or professor of accounting at the school in which you are currently enrolled must be submitted. Scholarship recipients will be announced July 1. Awards start at \$500.

South Carolina Resident  Yes  No

Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Telephone: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Parent's or Spouse's Name: \_\_\_\_\_

Parent's or Spouse's Address: \_\_\_\_\_

Parent's or Spouse's Occupation: \_\_\_\_\_

Parent's or Spouse's Income: \$ \_\_\_\_\_

Names and ages of all brothers, sisters or dependents:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Total Estimated Annual Expenses:

Tuition: \$ \_\_\_\_\_ Rent/Utilities: \$ \_\_\_\_\_

Books: \$ \_\_\_\_\_ Clothing: \$ \_\_\_\_\_

Transportation: \$ \_\_\_\_\_ Food: \$ \_\_\_\_\_

Medical: \$ \_\_\_\_\_ Misc.: \$ \_\_\_\_\_

Other: \$ \_\_\_\_\_

List members of immediate family who are attending college or university and for whom tuition is financed:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Sources of Total Annual Income:

Personal Income: \$ \_\_\_\_\_ Savings: \$ \_\_\_\_\_

Loans: \$ \_\_\_\_\_ Interest Income: \$ \_\_\_\_\_

Family: \$ \_\_\_\_\_ Other: \$ \_\_\_\_\_

Grants (explain in detail):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(Continued on reverse)

(Grants, continued)

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**Educational Information**

Colleges, Jr. Colleges Universities Attended	Major Field	Overall Average in Accounting Subjects	Degree Earned
<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>

Educational institution in which you are presently enrolled: \_\_\_\_\_

Four-year school     Two-year school    Present Class:  Senior     Junior     Sophomore

Anticipated date of graduation:    Do you plan to continue your education at this institution:     Yes     No

If not, where will you attend? \_\_\_\_\_

Do intend to pursue a major in accounting?     Yes     No

Do you plan to enter the field of public accounting?     Yes     No

Describe extracurricular activities in which you are involved:

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List campus or other organizations, societies in which you hold membership: \_\_\_\_\_

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List references other than relatives. Include name, address and occupation of each:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

I affirm that all statements made in this application are true to the best of my knowledge.

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

\_\_\_\_\_  
Date

Return this application with recommendation letter and transcripts by May 30 to the:  
 South Carolina Society of Accountants  
 1215 Anthony Avenue, Columbia, SC 29201  
 Questions: Call 803-540-7521