

The South Carolina Education Association-Retired
2025-2026 Scholarship Application Form

Must be postmarked by March 6, 2026

Name _____

Last

First

Middle

Social Security Number (last four digits) XXX-XX-_____ Date of Birth _____

Home Address _____

_____ Telephone _____

Personal email address _____

School _____

School Address _____

High School Graduation Date _____ Awards Day _____

Please request that your guidance counselor mail this application with all requested information, postmarked by March 6, to:

The South Carolina Education Association-Retired Scholarship Committee
2999 Sunset Blvd, West Columbia, SC, 29169

Please attach the following items to this application:

- Short essay (250-300 words) on "My Choice of Teaching as a Profession"
- Recommendation letters from two persons, one of which must be from a teacher or guidance counselor.
- Official high school transcript must include:
 - junior year and first semester grades of senior year,
 - class rank at end of first semester of the senior year
- Parents confidential report of financial status (form is provided)
- Optional: SAT/ACT scores are optional. Not including scores will not affect your chance of receiving a scholarship.

Applicant's Name _____ p.2

You may use additional pages to answer questions, but answers must be in the order of the application. Please do not include a resume.

1. In what activities or clubs have you participated? What offices have you held?
 - a. School:

- b. Church/Community:

2. What honors have you received?

3. What special talents and interests do you have?

4. What college or university do you plan to attend? _____

Have you applied? _____ Have you been accepted? _____

Thank you for your interest in choosing a career in education. We wish you all the best. Please plan to join The SCEA-Student association. The scholarship recipient will be notified by the SCEA-R on or before May 15.

Parent Confidential Report of Financial Status of Family

The SCEA-Retired Scholarship Application

Applicant's Name _____

First Parent/Guardian _____

Employed at _____

Average monthly income (*omit if not contributing financially*) _____

Second Parent/Guardian _____

Employed at _____

Average monthly income (*omit if not contributing financially*) _____

Total monthly income (*Include child support, if any received*) _____

Total average monthly expenditures _____

List all children and ages: _____

List any children attending college: _____

List any other persons receiving financial support from the family:

Have you applied for any other scholarships? _____ If so, which ones?

Why do you need financial assistance and explain any special family
circumstance(s) regarding the need for financial assistance:

Signature of Parent or Guardian: _____