



**Society of St. Vincent de Paul  
Deacon Thomas J Berney Conference  
EDUCATIONAL SCHOLARSHIP APPLICATION**



This scholarship is intended to help permanent residents of Beaufort and Jasper counties in South Carolina with financial hardships seeking an associates or undergraduate degree at any technical college or university located in Beaufort county to better their life or the lives of their family. The scholarship awards up to \$1,500 per academic semester and is paid directly to the Institution towards tuition, fees, books, and supplies. The final awarded amount is determined based on program and financial needs. The scholarship also awards up to \$500 for required equipment, tools or instruments for the entirety of the program which can only be paid directly to the bookstore.

**Eligibility:**

- Academic degree, diploma or certificate program acceptance at a Technical College or University located in Beaufort County, South Carolina.
- Evidence of financial need based on prior years tax return. Include Federal 1040 tax return with application.
- Maintain Satisfactory Academic Progress (SAP) as defined by your institution.

**Applicant Information:**

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

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

County: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

If residing with parent(s) or guardian(s) Parent/guardian name: \_\_\_\_\_

● Education

High School Diploma/GED GPA: \_\_\_\_\_ Date received: \_\_\_\_\_

High School or County where GED received: \_\_\_\_\_

College GPA: \_\_\_\_\_ through month/year: \_\_\_\_\_

● Academic program of acceptance

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

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

● Current Employment Information

Employer/Business Name: \_\_\_\_\_

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

Job Title: \_\_\_\_\_

Annual Salary (approximately): \_\_\_\_\_ Length of Employment: \_\_\_\_\_

Work experience or credentials earned: \_\_\_\_\_



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My family and/or I were/was assisted by the Saint Vincent de Paul Society of Bluffton, SC

Month/year: \_\_\_\_\_

**Essay Requirements**

- Attach an essay telling us how achieving your degree of choice will allow you to rise out of financial hardship.

**Letter of Recommendation**

- Attach a letter of recommendation from a community member or employer indicating their relationship to you and how the scholarship could improve your life. Include name and phone number.

**Evidence of Financial Need**

- Attach a copy of your prior year’s tax return (Federal 10140 Tax return).
- If you received all or part of your financial support from parent(s) or guardian(s), please attach their Federal 1040 tax return from the prior year as well as your own.

I authorize the verification of all the information provided on this application. I certify that my answers are true and complete to the best of my knowledge.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Send completed application, essay, letter of recommendation and prior year’s Federal 1040 tax return(s) postmarked by:

August 1st for Fall Semester

December 1st for Spring Semester

Applications received after these dates will still be reviewed and awarded dependent if funds are available.

Society of St. Vincent de Paul  
Attn: Scholarship Committee  
31 Saint Gregory Drive  
Bluffton, SC 29909  
Email: [svdpbluffton@gmail.com](mailto:svdpbluffton@gmail.com)

The Society of St. Vincent de Paul does not discriminate in educational or employment opportunities or decisions on the basis of personal characteristics that are not relevant to an individual’s abilities, qualifications, or job performance. Under federal and state law, these characteristics include age, race, color, sex, gender, religion, national origin, genetics, veterans’ status, and disability status.