



**Claflin University International Alumni Association
Annual Scholarship Application**

Name: _____
Last First Middle

Social Security Number: _____ Gender: ____ Male ____ Female

Mailing Address: _____

City, State, Zip: _____

Home Phone: _____ Cellular Phone: _____

Email Address: _____

Parent (s)' Name: _____

Mother's Occupation: _____

Father's Occupation: _____

Guardian's Name (s): _____

How many persons depend on your parents/guardian for support? _____

Have you been accepted to Claflin University? ____Y or ____N

Are you a full-time student at Claflin University? ____Y or ____N

CLASSIFICATION INFORMATION:

____ High School Senior (list high school) _____

Address of High School: _____

Name of Principal: _____ High School Phone: _____

Date of Graduation: ____/____/____ Class Rank: ____ Intended major at Claflin: _____

____ Claflin Student (list classification) _____

Major: _____ Anticipated Graduation Date: _____

Are you a previous CUIAA Scholarship Recipient? ____Y or ____N

Where did you learn about this scholarship?

____ E-Blast ____ CUIAA website ____ Claflin Alumni Office ____ Friend

____ Recruiter ____ Other (be specific): _____

Describe your financial need:

List your extracurricular activities at Claflin and in the community:

List your honors and awards:

Briefly share your employment history/ skills:



Clafin University International Alumni Association Annual Scholarship General Information

The Clafin University International Alumni Association will award a minimum of four (4) one thousand dollars (\$1,000) scholarships, with the possibility of renewal annually, to eligible students who plan to matriculate at Clafin University during the next school year and/or to undergraduate students who are presently enrolled at Clafin University.

CRITERIA

Applicants must:

1. Be graduating seniors from an accredited senior high school, career development center, or be a presently enrolled as an undergraduate at Clafin University. Current Clafin students must be in good standing with the university academically, not on academic probation.
2. Have applied to, have been accepted to, and/or be a full time student at the University.
3. Be officially enrolled at Clafin University.
4. Have high moral values, a record of high academic achievement and leadership ability.

Submit to the Scholarship Committee Chairperson of the CUIAA, the following information:

- A) Completed Clafin University International Alumni Association Scholarship Application. (No blank fields, utilizing "not applicable" or "N/A" for fields).
- B) A 300-500 word, typed double-spaced essay on the topic: "How Clafin University Can Help/Is Helping Me Obtain My Career Goals" (**ALL APPLICANTS**)

C) A copy of high school transcript (with SAT scores) for **NEW STUDENT APPLICANTS ONLY**.

D) A college transcript, required for matriculating applicants **ONLY**.

E) Three (3) letters of recommendations (Strong letters of recommendation provide an articulate and engaging portrait of the applicant, applicant's academic background and applicant's community engagement. All recommendations must be current, written at least within the last ninety days).

F) A Copy of Letter of Acceptance to Claflin University for **NEW STUDENT APPLICANTS ONLY**.

SUBMISSION INSTRUCTIONS:

All materials must be submitted via ground shipping/ UPS/FedEx/USPS/ mail. Send all ORIGINAL application components (CUIAA Application, Essay, SAT Scores, Transcript, Acceptance Letter, Recommendation Letters and Recommendation Letter Validation Form) to:

**Claflin University International Alumni Association
Gerald Mackey
1548 Harborsun Drive
Charleston, SC 29412**

ALL SUBMISSIONS SHOULD BE POSTMARKED BY JUNE 30th. LATE OR INCOMPLETE APPLICATION PACKETS WILL BE DISQUALIFIED.

CUIAA SCHOLARSHIP APPLICATION DEADLINE: JUNE 30, 2017

**CLAFLIN UNIVERSITY INTERNATIONAL ALUMNI ASSOCIATION
ANNUAL SCHOLARSHIP APPLICATION**

Recommendation Letter Validation Form

Name of Recommender: _____

Relationship to applicant: _____

Mailing Address: _____

City, State, Zip: _____

Home Phone: _____ **Cellular Phone:** _____

Email Address: _____

I certify that the letter of recommendation submitted by the applicant was submitted by me as a document expressing an opinion regarding an applicant's ability, previous performance, work habits, character, or potential for future success.

Recommender Signature: _____ **Date:** _____

Name of Recommender: _____

Relationship to applicant: _____

Mailing Address: _____

City, State, Zip: _____

Home Phone: _____ **Cellular Phone:** _____

Email Address: _____

I certify that the letter of recommendation submitted by the applicant was submitted by me as a document expressing an opinion regarding an applicant's ability, previous performance, work habits, character, or potential for future success.

Recommender Signature: _____ **Date:** _____

Name of Recommender: _____

Relationship to applicant: _____

Mailing Address: _____

City, State, Zip: _____

Home Phone: _____ **Cellular Phone:** _____

Email Address: _____

I certify that the letter of recommendation submitted by the applicant was submitted by me as a document expressing an opinion regarding an applicant's ability, previous performance, work habits, character, or potential for future success.

Recommender Signature: _____ **Date:** _____