

# 2020 SCHOLARSHIP APPLICATION

625 Taylor Street, Columbia, South Carolina 29201  
Phone: (803) 256-6238 / Fax: (803) 779-0635

**Type of Aide:** Scholarship

## **Amount of Award:**

To be determined by the Board of Trustees of the Charitable Foundation on an annual basis.

## **Criteria for Eligibility:**

The Scholarships are awarded to members in good standing of the Building Industry Association of Central of South Carolina, their children, or BIA employees, to assist those children in their pursuit of a post-secondary degree OR nominated by a member of the Building Industry of Central SC and meeting all the related requirements. Scholarship applicants must:

- Be a graduating high school senior accepted by or currently enrolled in an accredited two-year junior college or technical college or four year college or university in South Carolina, under graduate studies AND
- Have a cumulative grade point average of at least 2.0 on a four-point scale.

## **Closing Date:**

Completed application and materials must be received by **Monday, April 13, 2020**

**Be sure to submit your transcript with application.**

## **Mail To:**

**Building Industry Charitable Foundation  
625 Taylor Street  
Columbia, SC 29201**

## **Email to:**

**Alex Williams at [awilliams@columbiabuilders.com](mailto:awilliams@columbiabuilders.com)**

**2020 Building Industry Charitable Foundation Scholarship Application**  
**PERSONAL INFORMATION** Please type or fill in with blue or black ink

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

Address: \_\_\_\_\_  
Street State City Zip

Student's Email Address \_\_\_\_\_

Birth Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Student Phone: \_\_\_\_\_ Parent (other) Phone: \_\_\_\_\_

Father's Name: \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer (company) \_\_\_\_\_

Mother's Name: \_\_\_\_\_

Occupation \_\_\_\_\_ Employer (company) \_\_\_\_\_

Number of Siblings at home (not including yourself): \_\_\_\_\_

Number of Siblings in college (not including yourself): \_\_\_\_\_

Nominated by: \_\_\_\_\_

**Please check the scholarship(s) for which you are applying: (see eligibility criteria)**

The "Ernie Magaro Scholarship"

The "John B. Nieri Scholarship"

The "Jon Ryall Scholarship"

The "Sales & Marketing Council Scholarship"

The "Building Industry Charitable Foundation Scholarship"

The "Palmetto Place" Scholarship

The "Franklin David Clark 'The Dash' Scholarship"

**ACADEMIC INFORMATION** Please list information for the school in which you are currently enrolled

School: \_\_\_\_\_ Graduation Date: \_\_\_\_\_

Academic Cumulative Grade Point Average: \_\_\_\_\_ on a \_\_\_ 4pt \_\_\_ 5pt scale

What area of study do you intend to pursue, or are you pursuing?  
\_\_\_\_\_  
\_\_\_\_\_

At which school do you plan to apply this scholarship: \_\_\_\_\_

City, State of School: \_\_\_\_\_ Yearly Tuition of School: \$ \_\_\_\_\_

Yearly Room & Board: \$ \_\_\_\_\_ Yearly Cost of Books: \$ \_\_\_\_\_

Have you already been accepted to this school?  Yes  No

**SERVICE INFORMATION AND WORK EXPERIENCE**

**If applicable, please include a page listing your extra-curricular activities over the last 12 months in school and in the community. Items you may want to include:**

Membership Organizations and Clubs (include any positions gained), Honors and/or Awards, Community Activities/Volunteerism (church, non-school clubs, etc.). **Transcript Required.**

**On the same sheet, list any work experience you've had over the past 12 months including summer and after school employment and internships (paid or non-paid). Please include the dates of employment, company/organization name and position(s) held.**

*Your résumé can be submitted for this section.*

**FINANCIAL NEED**

Please list all other financial aid you have applied for and received in order to help pay for education in the coming scholastic period. Include financial aid program name, company or institution offering the aide and amount received.

**Program:** \_\_\_\_\_

Offered by: \_\_\_\_\_ Amount received: \_\_\_\_\_

**Program:** \_\_\_\_\_

Offered by: \_\_\_\_\_ Amount received: \_\_\_\_\_

Please list all other financial aid you have applied for and which is still pending in order to help pay for education in the coming scholastic period. Include financial aid program name, company or institution offering the aide and amount you could receive.

**Program:** \_\_\_\_\_

Offered by: \_\_\_\_\_ Possible Amount: \_\_\_\_\_

**Program:** \_\_\_\_\_

Offered by: \_\_\_\_\_ Possible Amount: \_\_\_\_\_

Are there any extenuating financial circumstances that we should consider when reviewing your application?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*Please include FINANCIAL NEED information on another sheet if necessary*

**The information contained in this application is correct to the best of my knowledge.  
Transcript is attached.**

Student Signature \_\_\_\_\_

Date \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_