

## Scholarship Overview

Thank you for your interest in the James F. Byrnes Scholarship Program. **Please read the entire application packet carefully so that you understand both the qualifications and responsibilities associated with this scholarship.** Please feel free to contact us if you have any questions.

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### Overview

The James F. Byrnes Foundation is a non-profit charitable organization and functions under the auspices of a twelve-member Board of Directors. Each Director was also a Byrnes Scholarship recipient.

Established in 1948, The Byrnes Foundation has provided both the means and inspiration for hundreds of South Carolina's young men and women to achieve college educations. Mr. and Mrs. Byrnes' legacy continues today in the lives of young people who proudly bear the designation, Byrnes Scholars.

For additional historical or current information, please visit our website at [www.byrnesscholars.org](http://www.byrnesscholars.org)

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### Eligibility

To be eligible for the James F. Byrnes Scholarship, a student must meet the following qualifications:

- have one or both parents deceased
  - be a United States citizen and a South Carolina resident
  - have need of financial assistance to attend college
  - be a current senior in high school
  - have a satisfactory academic record
  - plan to pursue a bachelor's degree at an in person accredited four-year college or university
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### Selection of Recipients

Applications will be screened by the Board of Directors in February and March to select semi-finalists. If selected as a semi-finalist, applicants must be available to attend an in person interview scheduled for **April 24 or 25, 2025**. Scholarship recipients are selected after semi-finalists' interviews.

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### Awards

If selected as a recipient, the student will receive a \$5,000 award, renewable for a total of four years: total award \$20,000 for the academic career. Awards are for undergraduate study only.

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### Obligations

Recipients have the following obligations to the James F. Byrnes Foundation. They must maintain a 2.0 GPA and send semester grades to the Foundation office after each semester is complete. Each year, recipients must participate in the following activities:

- Byrnes Scholars' Luncheon in Columbia on the second Saturday in June
  - Super Weekend in Garden City Beach, SC, the third full weekend of March
  - Fall Dinner held in October, at a location near the College / University where the scholar attends – dates TBD
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## Application Coversheet

Please mark off each item once you have verified it is included with your submission and sign the bottom of this page.

**Please include this page as the first sheet of your submission packet.**

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### Application Checklist

All items must be completed by the applicant in the original format and submitted in **ONE EMAIL**. Please fill in your application responses, filling in every blank. **Note: Incomplete applications will not be considered.**

**Refer to this checklist to ensure that you have provided all the necessary information for your application to be processed.**

- 1- A single PICTURE OF YOU
  - 2- Complete Application packet, make sure all questions are answered. Typed documents are preferred.
  - 3 - Un-official copy of transcript that includes class rank, number of students in class and GPA through the fall semester of your senior year. If your school does not use class ranking, please submit a letter of support from Guidance.
  - 4 - Copy of ACT and/or SAT scores. If you do not have ACT/SAT scores, please submit a letter of explanation from Guidance.
  - 5 - Your Story – Brief Autobiography of no more than 3 typed pages. Please include a description of home situation, the death of parent(s), reasons for wanting a college education, career ambitions, reason applying for financial assistance, and plans for financing a college education.
  - 6 - Reference Forms (**Must have exactly two**). At least one reference **must** be a current guidance counselor or teacher. Relatives may not be used as references. The student should forward the reference form to an individual he/she chooses, and the person will return the completed form via email to [scholarships@jfbf.org](mailto:scholarships@jfbf.org). It is the student's responsibility to follow up with the references to ensure they are submitted before January 25, 2025.
  - Applications may be submitted December 01, 2024 – January 25, 2025. **Applications received after January 25 will not be accepted.** Return via email to [scholarships@jfbf.org](mailto:scholarships@jfbf.org)
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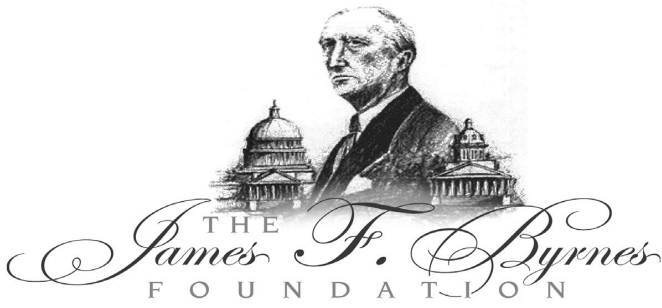
### Submission Tips and Reminders

Please note the following items to ensure your application contains all the necessary information and is received in time so it can be considered.

- Double check to make sure all items mentioned above are included in your submission.**
  - Follow up with your references to confirm they have submitted their forms.**
  - Do not submit additional documents to the packet, only what is listed above will be considered.**
  - You should keep a copy of the application for your records.**
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**Verification: I have verified ALL the contents of my package are accurate and complete.**

Applicant: \_\_\_\_\_ Date: \_\_\_\_\_



# College Scholarship Application for 2024

### PLEASE NOTE:

Documents must be returned before **January 25, 2025**  
Please email to [scholarships@jfbf.org](mailto:scholarships@jfbf.org)

- 1) Picture
- 2) Application (pages 2 – 6 of application packet)
- 3) Transcript – if no transcript, letter from Guidance
- 4) Score – ACT/SAT
- 5) Essay – no more than 3 pages

Your reference letters must be submitted by the persons completing your forms before January 25, 2025.

This is a fillable document, please complete, save, and submit with other documents.

## I. PERSONAL DATA:

Name \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ Preferred Name \_\_\_\_\_  
Last First Middle

Date of Birth: \_\_\_\_\_ Male Female Single Married # of Children: \_\_\_\_\_

Phone: home (\_\_\_\_) \_\_\_\_\_ cell (\_\_\_\_) \_\_\_\_\_ Email Address \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

High School: \_\_\_\_\_ Date of Graduation: \_\_\_\_\_

School Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Guidance Counselor: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

College Preference	Major / Area of Study
1)	
2)	
3)	

How did you hear about the James F. Byrnes Scholarship?  
 \_\_\_\_\_

If you heard about the foundation from a Byrnes Scholar, please provide their full name, scholar year and phone number.  
 \_\_\_\_\_

- Have you ever been:
- found responsible for a disciplinary violation at any educational institution you have attended from the 9<sup>th</sup> grade forward? Yes     No
  - adjudicated guilty or convicted of a misdemeanor, felony or other crime? Yes     No

If yes, to either question, please explain the circumstances and outcome reflecting on what you learned from this experience. \_\_\_\_\_

**II. EXTRACURRICULAR ACTIVITIES**

**Offices or leadership positions held in high school:**

Organization / Group	Start	End	Position / Description

**School clubs, organizations, sports, honor societies, etc. in which you have actively participated:**

Organization / Group	Start	End	Description

**Special interests and hobbies outside of school (personal, church, community, etc.) :**

Interest / Hobby	Start	End	Description

**Special talents (singing, musical instruments, etc.):**

Talent	How Long

**Briefly describe any work experiences (paid or voluntary). What was the length of employment?**

Company / Organization	Start	End	Position / Description

Do you plan to work the summer prior to entering college or while in college? Please explain.

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What is the ONE most interesting thing about you that you want us to know?

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**III. FAMILY INFORMATION**

Parent/Guardian with whom you live: \_\_\_\_\_ Relationship: \_\_\_\_\_

Parent/Guardian occupation & employer: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Stepparent: \_\_\_\_\_ Stepparent Occupation/employer: \_\_\_\_\_

Name of Deceased Parent: \_\_\_\_\_ Cause of Death: \_\_\_\_\_ Year \_\_\_\_\_

Name of Deceased Parent: \_\_\_\_\_ Cause of Death: \_\_\_\_\_ Year \_\_\_\_\_

Brother / Sisters Name	Age	Living at home?	Attending school? (Elem, Middle, High, College)

**IV. COLLEGE FINANCIAL INFORMATION**

**What Funding have you applied for or been provided?**

Source (Scholarships, Grants, Loans, Gifts, Trusts, etc.)	Duration (one-time, annual, etc.)	Status (Granted, pending, etc.)	Amount

**Total Amount:** \_\_\_\_\_

**Expenses (per Year)**

Expense	Amount
Tuition	
Food	
Housing	
Books / Supplies	
Transportation	
Other	

Do you plan to live on campus? Yes      No      **Total Expenses:** \_\_\_\_\_

**V. FAMILY FINANCIAL INFORMATION**

Family Residence: Own      Rent

Monthly Amount: \_\_\_\_\_

Do you have a car now?                      Yes      No

Will you have a car while in college? Yes      No

If so, how did you acquire your car?

**Family Vehicles:**

Year	Make	Model

**Assets**

*Total combined value of family assets.*

Type	Amount
Available Cash <sup>1</sup>	
Investments <sup>2</sup>	
Home <sup>3</sup>	
Other Real Estate <sup>4</sup>	
Business <sup>5</sup>	
Retirement <sup>6</sup>	
Other	
<b>Total Assets:</b>	

**Debts**

*Current outstanding balances of family debts.*

Type	Amount
Real Estate	
Vehicles	
Credit Cards	
Medical	
Education	
Other	
<b>Total Debts:</b>	

**Monthly Income**

*All income: Salary, Disability, Retirement and any other wages or public / private assistance of family.*

Type	Amount
Applicant Wages	
Parent / Guardian Wages	
Stepparent/Guardian Wages	
Social Security	
Interest / Dividends	
Real Estate	
Other	
<b>Total Monthly Income:</b>	

**Additional Information (if needed)**

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<sup>1</sup>Checking, Savings, Money Market, CD, Other

<sup>3</sup>Personal Home / Residence

<sup>5</sup>Current Market Value + Cash-On-Hand

<sup>2</sup>Trusts, Stocks, Bonds, 529, Coverdell, Other

<sup>4</sup>Rental Property, Land, Buildings, Other

<sup>6</sup>401K, IRAs, Pension, Annuity, Other