

**SOUTH CAROLINA ASSOCIATION
OF
EDUCATIONAL OFFICE PROFESSIONALS-RETIRED
(SCAEOP-R)**



**DOT AIKEN SCHOLARSHIP
FOR
SCAEOP-RETIRED MEMBERS'
GRANDCHILDREN AND GREAT GRANDCHILDREN**

**Please read carefully as some
GUIDELINES have changed and must be followed!**

**APPLICATION FOR 2025 SCHOLARSHIP
MUST BE POSTMARKED BY January 15, 2025**

**SUBMIT completed packet to:
Pauline A. Alford, CEOE, Chairman
212 SW Fieldsedge Drive
Moore, SC 29369
Cell: 864-316-4841**

**SOUTH CAROLINA ASSOCIATION OF EDUCATIONAL OFFICE PROFESSIONALS-RETIRED
(SCAEOP-R)**

**Dot Aiken Scholarship for SCAEOP-Retired Grandchildren and Great Grandchildren
GUIDELINES**

Please read the Guidelines carefully and adhere to the instructions. It is recommended that the applicant make and keep a copy of all documents submitted as the application packet in its entirety will be retained by SCAEOP-R and not returned to the applicant. The strictest confidence will be maintained during the application process.

TO QUALIFY FOR THE \$1,000.00 Scholarship, the applicant must:

Be a grandchild or great grandchild of a SCAEOP-Retired member. The grandparent/great grandparent must have been a South Carolina Association of Educational Office Professionals (SCAEOP) member for five (5) years or a current SCAEOP-RETIRED member in good standing.

Be a graduating high school student who has made application to an accredited institution of higher learning OR may be currently enrolled in an accredited institution of higher learning.

Maintain a 2.5 GPA (grade point average) or “C” letter grade, depending upon the institute’s academic grading system.

The applicant must submit the following:

The SCAEOP-Retired Dot Aiken Scholarship.

A **transcript (1)** provided by the graduating student’s high school **OR a transcript (1)** provided by the accredited institution of higher learning. The post-secondary transcript should include all course work completed as the last grading period.

NO FAMILY FINANCIAL DATA IS REQUIRED

A one-page essay on “Why I am Choosing to Further My Education.”

A letter (1) from either Counselor, Teacher, Professor or Administrator that describes the student’s activities and leadership record in high school/college/university, personal traits, character, initiative, home background, etc.

A letter (1) from an employer or member of the community or church, NOT a member of the family or a member of SCAEOP or SCAEOP-RETIRED. **(No other information about the applicant will be accepted.)**

A one-page statement by a grandparent or great grandparent as to why the application is being submitted along with verification of SCAEOP and SCAEOP-R memberships.

If an applicant has received the SCAEOP-R Dot Aiken Scholarship in prior years, and is still in an accredited college, they may apply again for the SCAEOP-R Dot Aiken Scholarship.

See the scholarship checklist form to ensure the required materials are sent with the application packet. No scholarship will be awarded if the Scholarship Committee concludes that no applicant met the specific qualifications.

Revised: 1/2025

Name of Applicant: _____

STUDENT ESSAY

“WHY I AM CHOOSING TO FURTHER MY EDUCATION”

(Signature of Applicant)

(Date)

**SOUTH CAROLINA ASSOCIATION OF EDUCATIONAL OFFICE PROFESSIONALS-RETIRED
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**Dot Aiken Scholarship
for SCAEOP-Retired Grandchildren/Great Grandchildren**

PACKET CHECKLIST

This sheet should serve as the cover to your entire application packet. Please make certain that all materials are included and, in the order, found on this sheet. The original application and **ALL** materials must be sent to the Scholarship Committee Chairman, postmarked by **January 15, 2025**. Finally, initial that each item is present. Incomplete applications will not be considered. **Only ONE (1) transcript is needed.**

	Applicant's Initials
1. SCAEOP-RETIRED DOT AIKEN SCHOLARSHIP APPLICATION FORM	_____
2. High school or college transcript	_____
3. One-page essay, "Why I am Choosing to Further My Education"	_____
4. One letter from principal, counselor, administrator, teacher/professor, or coach	_____
5. One letter from an employer or member of the community, and NOT a family member OR member of SCAEOP or SCAEOP-Retired.	_____
6. One-page statement from grandparent or great grandparent	_____

Date	Student's Signature
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