



USCL EMERGENCY TEXTBOOK SCHOLARSHIP APPLICATION

2017-2018 Academic Year

Who is eligible?

Any USCL student with a minimum of a **2.50** grade-point average*, who is enrolled in at least **12** credit hours for the semester (unless it is the last semester to complete a degree) and is able to demonstrate insufficient means to meet book expenses with current resources and financial aid. Individual awards will be limited to **\$300** per semester. Awards are based on available funds and is not guaranteed to be available each semester.

* Continuing Students: USC GPA; Freshmen w/ <12 attempted hours: SC HS UGS GPA; Transfer Students: Collegiate GPA

Application Procedure

1. Complete **Section I** of this application
2. Provide a **statement** detailing why you need the scholarship.
3. Attach a copy of your semester **schedule** and a copy of your **transcript** from Self Service Carolina.
4. Complete **Section II** and attach a printed quote of book expenses from the Campus Bookstore Website.
5. Have **Section III** completed by the USCL Financial Aid Office.

Turn in the completed application to: **USCL Financial Aid Office; 127 Starr Hall**

Factors Considered in Award Process

- Financial Need
- Previous Emergency Textbook Scholarships received
- Applicant Statement
- Educational and Career Goals
- Grade-Point Average
- Number of Credit Hours Completed
- Number of Credit Hours Enrolled In Current Term

Deadline for Submitting Application: The deadline for each term is the last day to register/change schedule.

| FALL DEADLINES | | SPRING DEADLINES | |
|---------------------------------------|--------------------------|----------------------------------|--------------------------|
| Fall and Fall 1 st 8 weeks | August 30 th | Spring & 1 st 8 weeks | January 22 ND |
| Fall 2 nd 8 weeks | October 25 th | Spring 2 nd 8 weeks | March 21 ST |
| SUMMER DEADLINES | | | |
| Maymester | TBA | Summer 1 | TBA |
| Summer 2 | TBA | | |

Applications may be submitted after due dates above with faculty recommendation only.

Awards may be made to students whose financial aid is still pending at the time of application. When financial aid is finalized, adjustments may be made.

Emergency Textbook Scholarship Application

USCL Emergency Textbook Scholarship Committee

Please complete the information below, attach a copy of your semester schedule and a copy of your transcript from SSC and return promptly to the address on p. 1. This information is required before any book scholarship can be approved.

Section I (To be completed by student)

Student's Name: _____ VIP ID: _____
 Major/Program of Study: _____ Phone Number: (_____) - ____ - ____
 Semester Requested: _____ USC E-mail: _____@email.sc.edu
 Hours Enrolled: _____

Section II – Books

For each book you need help purchasing, list the course, book title, and the cost.

Print and attach a quote of book expenses from the Campus Bookstore Website.

| <u>COURSE and BOOK TITLE</u> | <u>BOOK COST</u> |
|--|------------------|
| _____ | \$ _____ |
| _____ | \$ _____ |
| _____ | \$ _____ |
| _____ | \$ _____ |
| _____ | \$ _____ |
| _____ | \$ _____ |
| Total Cost of Books (include taxes, if any): | \$ _____ |
| Amount of Scholarship Aid Requested: | \$ _____ |

By signing below I am stating that all of the information provided is accurate to the best of my knowledge:

STUDENT SIGNATURE: _____ **Date:** _____

Section III (To be completed by Financial Aid Office)

Tuition, Fees, and Awards are all reported for current semester.

| | |
|----------------------------|-------------------------------------|
| FAFSA RECEIVED DATE: _____ | COMPLETE DATE: _____ |
| COST OF ATTENDANCE: _____ | EXPECTED FAMILY CONTRIBUTION: _____ |
| NEED: _____ | TOTAL ANNUAL AWARDS: _____ |
| PRIOR E.T.S. AWARD: _____ | SEMESTER RECEIVED: _____ |

THE FOLLOWING INFORMATION IS FOR THIS SEMESTER: _____

| | |
|--------------------------------------|---|
| TOTAL ACTUAL TUITION AND FEES: _____ | GRANTS/TUITION ASSISTANCE: _____ |
| SCHOLARSHIPS: _____ | LOANS ACCEPTED: _____ |
| LOANS OFFERED: _____ | TOTAL PENDING AID: _____ |
| TOTAL AVAILABLE AID: _____ | EXPECTED DATE PENDING AWARDS BECOMES AVAILABLE: _____ |

COMMENTS: _____

Financial Aid Officer Signature: _____ **Date:** _____

FOR OFFICE USE ONLY

Approved: ____ Denied: ____

Chair Signature

Date

Reason for denial: _____
