

SOUTH CAROLINA
PALMETTO FELLOWS SCHOLARSHIP
2009-2010



As a Palmetto Fellows Scholarship recipient, I certify that I have not been convicted of any felonies. Further, I certify that I have not been convicted of a second or subsequent alcohol or drug related misdemeanor offense during the preceding calendar year defined as 12 months from the date of the start of school for the period of this award. If I am adjudicated delinquent or am convicted or pled guilty or nolo contendere to any felonies or a second or subsequent alcohol or drug related misdemeanor offense under the laws of this state or any other state, I agree to notify the Financial Aid Office by the start of school. I hereby give permission for a background check to be conducted to verify the above. I understand additional information may be requested after the background check has been conducted.

Any false statement provided by the student or any attempt to expend any scholarship funds for unlawful purposes or any purpose other than in payment or reimbursement for the cost of attendance at the institution authorized to award the scholarship will be cause for immediate cancellation. Any student who has obtained a scholarship through means of a willfully false statement or failure to reveal any material fact, condition, or circumstance affecting eligibility will be subject to applicable civil or criminal penalties, including retroactive loss of the scholarship.

I also affirm that I am presently not in default on any Federal or State student loans nor do I owe any refunds to any Federal or State financial aid programs.

If you have ever been an adjudicated delinquent, convicted or pled guilty or nolo contendere to any felonies and/or second or subsequent alcohol/drug related misdemeanor offenses, please list them below.

Conviction 1: _____ Date: _____ Jurisdiction: _____

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By providing my signature below, I certify that I meet the aforementioned criteria above, and neither apply to me. Also, I affirm that I fully understand that renewal eligibility is based on my **earning no less than a 3.0 grade point average and earning 30 hours per academic year. (For first-time students entering the spring semester, earn a 3.0 cumulative grade point average and complete 15 credit hours.)**

Please check one of the following statements and sign below.

_____ I intend to enroll full-time at Coastal Carolina University for the 2009-2010 academic year. I graduated from a South Carolina high school in the month of _____ in the year _____.

_____ I DO NOT plan on attending Coastal Carolina University for the 2009-2010 academic year.

Signature

Date

Print Full Name

Social Security Number

Please return completed form to: Coastal Carolina University / Office of Financial Aid / P.O. Box 261954 / Conway, SC 29528-6054
Faxes are accepted. Fax Number: (843) 349-2347

The Palmetto Fellows Scholarship is dependent upon action by the General Assembly and amounts are dependent upon the availability of funds to be appropriated for the program.