

Lancaster County Clemson Club Scholarship

First name	Middle	Last
Home mailing address		
City		State Zip
Home phone	Cell phone	Email address
Parents'/guardian's names		
Parents'/guardian's occupate	sity information	
emson Univers	sity information	eges of study at Clemson University
emson Universon Universon I am interested in one o	sity information or more of the following colle	eges of study at Clemson University ☐ Education
I am interested in one of Agriculture, For Life Sciences Architecture, A	sity information or more of the following colle orestry and	
Emson Universon I am interested in one of Agriculture, For Life Sciences	sity information or more of the following colle orestry and	☐ Education ☐ Engineering, Computi
Emson Univers I am interested in one of Agriculture, For Life Sciences Architecture, A	sity information or more of the following colle orestry and Arts and	☐ Education ☐ Engineering, Computi and Applied Sciences



Education experiences

High school from which you will graduate	Date of graduation	GPA
0 7 0	U	
Highest SAT/ACT (please provide sectional scores) - optional		
High School Extracurricular activities		
High School Honors		
High School Leadership Roles		
Work experience(s)		
Past/current jobs		



Community activities	
Community activities	
Community honors	
Community leadership roles	
ferences (other than family members)	
Reference name	Phone
Reference name	Phone
Reference name	 Phone



Your commitments

I am in the top 25% of their high school and academic potential.	class and demonstrate scholarly achievement	
I am a full-time resident of Lancaster Co	ounty for each year I accept the scholarship.	
I must maintain a 2.8 G.P.R while taking a minimum of 12 hours per semester at Clemson University.		
I will be expected to maintain exemplar	y grades, behavior and class attendance.	
I will be expected to provide regular wr Lancaster County Partners for Youth.	itten and in-person progress reports to	
I will be required to sign a <i>Memorandum of Understanding</i> detailing these commitments.		
Applicant's signature	Date	
Parent's/guardian's signature	Date	

I understand and agree to the stipulations below for receiving this scholarship.

Return this application, along with a copy of your most recent high school transcript and cover letter explaining why you want to attend Clemson, by 4 p.m. March 31, 2025 to

Mailing Address
Sharon Novinger
Lancaster County Partners for Youth Foundation
P.O. Box 1023
Lancaster, South Carolina 29721

Or complete, sign, scan, and return the application to sharon@lcpartnersforyouth.org.

Interviews will be in the later part of April/early May. Applicant will be contacted at the email address provided to PFY. If you have any questions, please call 803-286-1465 or email the Lancaster County Partners for Youth Foundation at sharon@lcpartnersforyouth.org.

