

THE EVELYN J. DAVIS MEMORIAL SCHOLARSHIP FUND

Administered by
American Board of Funeral Service Education

The **EVELYN J. DAVIS MEMORIAL SCHOLARSHIP FUND** was established to provide financial assistance to students enrolled full time in accredited colleges of mortuary science, as they obtain their professional education. The American Board of Funeral Service Education will determine scholarship amounts annually.

Selection of scholarship recipients is competitive and each year a number of students apply. The officers of the American Board of Funeral Service Education make the selection. Prospective recipients must apply during their third quarter of studies. The proceeds of the scholarship will be applied to the fourth quarter tuition of the recipient. An award will be made in June and December of each year unless and until the officers of the American Board of Funeral Service Education make changes in the time or frequency of the awards. Applications must be postmarked and mailed to the South Carolina Funeral Directors Association office no later than **April 1** for the **June** award or by **October 1** for the **December** award.

ELIGIBILITY: To be eligible for an award, a student must:

- Be a full-time student in an accredited college or department of mortuary science and who has expressed the intent to enter funeral service within the state of South Carolina upon graduation;
- Submit a letter of recommendation and endorsement of the owner/manager of a funeral home that is a member of the South Carolina Funeral Directors Association (SCFDA);
- Submit a letter of recommendation and endorsement from the funeral service institution at which the student is enrolled as a full-time student. The letter must attest the student's eligibility as outlined herein;
- **Be in the third quarter of studies at time of submitting application, and have an overall scholastic average of 85% or better in each of the first two quarters of study** (if for any reason the student does not return for the fourth quarter, the scholarship money will be refunded to the American Board of Funeral Service Education);
- Have demonstrated responsibility through good attendance habits;
- Have demonstrated the qualities of professionalism that are so vital to success within funeral service;
- Have demonstrated a degree of financial need for scholarship assistance;
- Funeral home employment experience is preferred;
- Scholarship selection is made without regard to race, sex, creed, or national origin

The application for the **EVELYN J. DAVIS MEMORIAL SCHOLARSHIP FUND** may be requested from the Executive Office of the South Carolina Funeral Directors Association, PO Box 1350, Mt. Pleasant, SC 29465. The Association telephone number is 800-445-3427.

The completed application form and other relative material should be postmarked and mailed to the Executive Office of SCFDA at the above address by **April 1** for the **June** award or by **October 1** for the **December** award.

THE EVELYN J. DAVIS MEMORIAL SCHOLARSHIP FUND
American Board of Funeral Service Education
APPLICATION FORM

PERSONAL INFORMATION

Name: _____

Permanent Address: _____

Current Address (*if different*): _____

Phone: _____

Date of Birth: _____ Place of Birth: _____

Marital Status: Married Never Married Separated Divorced Widowed

Dependents (*names and ages*): _____

PARENTS' INFORMATION

Complete only if you are declared a dependent on your parents' federal income tax form for the last tax year.

Father's Name: _____

Physical Address: _____

City: _____ State _____ ZIP _____

Father's Occupation: _____

Name of Firm: _____

Mother's Name: _____

Physical Address: _____

City: _____ State _____ ZIP _____

Mother's Occupation: _____

Name of Firm: _____

Brothers and Sisters in family:

Name	Age	In College:
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FINANCIAL INFORMATION

Give a brief statement relative to your financial need, including any circumstances or factors relative to your need, source of funds for paying tuition and expenses, etc. Are you in receipt of any grants, loans, or scholarships from any other sources?

SPOUSE'S INFORMATION (if applicable)

Name: _____

Physical Address: _____

City _____ State _____ ZIP _____

Occupation: _____

Name of Firm: _____

YOUR EMPLOYMENT STATUS

Present place of employment (while in school) _____

Hours per week worked _____ Supervisor _____

EDUCATION BACKGROUND

High School	Years Attended	Year Graduated
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Colleges	Years Attended	Year Graduated
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Degree(s) received, including major _____

MILITARY BACKGROUND *(if any)*

Branch **Period of Service** **Rank Obtained**

Honors or awards received in military _____

SCHOOL, COMMUNITY SERVICE, HONORS, AWARDS RECEIVED, CHURCH ACTIVITIES, OFFICES HELD, ETC.

WORK EXPERIENCE *(List jobs including summer employment)*

Job Held **Employer** **Dates**

Have you had experience in funeral service? Yes No

Years _____ Months _____ Apprenticeship _____

ANY OTHER FACTS RELATIVE TO APPLICATION

THE FOLLOWING MUST ACCOMPANY YOUR APPLICATION

- _____ A recent photograph *(not for discriminatory purposes)*
- _____ Your current academic transcript
- _____ Submit a letter of recommendation and endorsement of the owner/manager of a funeral home that is a member of the South Carolina Funeral Directors Association (SCFDA);
- _____ Submit a letter of recommendation and endorsement from the funeral service institution at which the student is enrolled as a full-time student. The letter must attest the student's eligibility as outlined herein.

I understand that the information submitted within this application is being used in consideration for the **EVELYN J. DAVIS MEMORIAL SCHOLARSHIP**. I hereby certify that all the information given is correct, true, and factual; and, further, that I completed the application on my own.

Date of Application

Signature