The William Manning Malloy Scholarship Fund

**Guidelines for the Scholarship Committee**

The William Manning Malloy Scholarship Fund was established in 2001 as a result of a gift that was made to the First Presbyterian Church of Cheraw by William Manning Malloy.

The Scholarship is to be awarded annually to at least one, but no more than two, of the most highly qualified graduating high school senior applicants, as determined by the Scholarship Committee. Recipients are to be legal residents of Cheraw, South Carolina, and the five mile radius therefrom.

Selection of the Recipient(s) will be made by a Committee appointed by the Session of the First Presbyterian Church of Cheraw. The Recipient(s), in addition to high academic standing, should possess character demonstrating an interest in acquiring a higher education through behavior and grades, and qualities of learning and leadership.

*NOTE: Each Applicant is to be provided with a SECONDARY SCHOOL REPORT Form to be completed by their high school principal (or guidance counselor) and returned with a sealed copy of their high school transcript.*

At the discretion of the Scholarship Committee, the Applicant(s) may be required to meet with the Scholarship Committee at an appointed time for an interview.

Notification of Award letters are to be provided to the Recipient(s) with a copy to the Finance Committee, who will appropriate the scholarship funds for disbursement.

The funds are to be paid directly to the school, with the Recipient of the Scholarship being jointly named, upon notification by the school that the Beneficiary has been accepted and is in attendance as a full-time student.

Because this Scholarship is a gift, the recipients are not to repay any of the benefits received.
The William Manning Malloy Scholarship Fund

General Information

The William Manning Malloy Scholarship Fund was established in 2001 as a result of a gift that was made to the First Presbyterian Church of Cheraw by Mr. William Manning Malloy.

The Scholarship is to be awarded annually to at least one, but no more than two, of the most highly qualified graduating high school senior applicants, as determined by the Scholarship Committee.

Requirements

- High Academic Standing,
- Demonstrated active interest, through behavior and grades, in acquiring a higher education, and
- Qualities of learning and leadership

Application

For an applicant to be considered for this Scholarship, the Application must be filled out completely in black ink, or typed. The Application must be received at the following address no later than March 1st before the beginning of the school year for which aid is applied.

The William Manning Malloy Scholarship Fund
First Presbyterian Church
Post Office Box 552
Cheraw, SC 29520

Attn: Scholarship Committee
**FIRST PRESBYTERIAN CHURCH**  
The William Manning Malloy Scholarship Application

Please print in Black Ink                        Completed Application must be received on or before March 1st

**I. Applicant (Personal) Information**

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<th>Name, Last</th>
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<tr>
<td>&quot;Preferred&quot;</td>
<td>Social Security #</td>
<td>Gender</td>
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<th>Current Street Address</th>
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<th>Phone</th>
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<th>Parent(s) or Guardian(s)</th>
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<th>Current Street Address</th>
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**II. EDUCATION (Attach most recent transcript)**

A. High School Attended

B. List all honors and/or special recognitions received in High School  
   (attach extra sheet if necessary)
   1.  
   2.  
   3.  
   4.  

C. List extra-curricular activities and/or hobbies (attach extra sheet if necessary)
   1.  
   2.  
   3.  

D. Name of College you plan to attend

**III. List any work experience**

1.  
2.  

Revised May 21, 2008
IV. REFERENCES

A. Principal (or Guidance Counselor) for Secondary School Report Form *provided with Application

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<thead>
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<th>Name</th>
<th>Phone</th>
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<tbody>
<tr>
<td>Street Address</td>
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<td>City</td>
<td>State</td>
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<tr>
<td>School</td>
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B. List at least two (2) personal references

1. Name       Phone
   Street Address
   City       State | ZIP
   Relationship

2. Name       Phone
   Street Address
   City       State | ZIP
   Relationship

V. PERSONAL STATEMENT

Attach a one page (or less) Statement of why you feel you should be considered for this Scholarship.

Signature of Applicant _____________________________________________

Signature of Parent, or Guardian ____________________________________

Date of Application ______________________________

*Must be received on or before March 1st before the beginning of the school year for which aid is applied*