



SCASBO

South Carolina Association of
School Business Officials

SCHOLARSHIP INFORMATION FORM

Congratulations on being a recipient of the SCASBO Scholarship! Upon submission of this form, your scholarship will be forwarded directly to the college/university that you will attend in the fall. Please complete, sign form and return to Stephanie Thomas via email sithomas@greenville.k12.sc.us. Information must be received **no later than May 31, 2024**. Information provided by you will be shared with the college/university. Note: Please type or print clearly.

Scholarship Recipient Name _____

SSN _____

Telephone _____
Area Code Telephone Number

Name of College/University _____

Name of Financial Aid Official _____

Financial Aid Office Address _____
Street

City State Zip Code

Financial Aid Office Telephone _____
Area Code Telephone Number

I verify that the above information is accurate and that _____ will be enrolled in _____ College/University for the 2024-2025 academic year.

Signature of Student _____ Date _____

Signature of Parent/Guardian _____ Date _____