

Lander University Financial Aid Office

320 Stanley Avenue, Greenwood, SC 29649 Email: finaid@lander.edu • Web: www.lander.edu/finaid Phone: (864) 388-8340 • Fax: (864) 388-8811

LIFE Scholarship for Non-SC High School Graduates

Student's Last Name	First Name	MI	Lander ID (L#)
One requirement for the from a SC high school; prescribed by law; or gradependent of a parent or gof the dependent, and mayou feel that you meet please provide the fol eligibility to receive thes	or successfully duated from a propuration who is a left residency requitors above requilowing docume	completed a home eparatory high school egal resident of this uirements for tuition irements for the \$	e school program as pol outside SC while a State and has custody a and fee purposes. If SC LIFE Scholarship,
final high school	ng an out-of-state transcript and requ	high school, then you est that Lander Unive	Class Rank u must provide an official ersity calculate your GPA an 1100 SAT or 24 ACT.
dependent. The high school; AN A signed copy of AND	of your custodial e tax form must co D	parent's federal tax prrespond to the ye nt's SC state tax ret	Resident of SC: return listing you as a ar you graduated from turn for the same year;
Please take a few minute forms and return to us imr the LIFE Scholarship until	nediately. We will	not be able to deter	rmine your eligibility for
As with all state scholarsh continued funding by the this scholarship in the eve	state legislature.	We reserve the righ	nt to reduce or remove
Please do not hesitate to	contact the Finan	cial Aid Office if you	have any questions.
Please review my eligibite required documentation Scholarship.			
Student's Signature (Require	ed)	Phone #	Date