



### Justin O'Connor Memorial Fund Scholarship at Eastern Carolina Community Foundation

**Application must be submitted by March 31.**

Justin O'Connor was a loving son and caring brother. He was a generous friend and gifted athlete whose joy and love for life were contagious. Only 17 years old, Justin was entering his senior year at Trinity-Byrnes Collegiate School with a dream of playing college baseball. That dream ended on an early morning in July 2017 because of distracted driving. This scholarship was established by Justin's family and friends to honor his memory and help others reach their goals.

**Purpose:** To provide two scholarships of \$1,000 each:

- An **academic award** for achievement based on the qualities of Justin who is remembered for his outgoing nature and great sense of humor. He was well liked by all groups of people, funny, athletic and always had a smile on his face! He was also a diligent student and fantastic guitarist.
- An **athletic award** will be given to a student athlete who has been accepted to a 4-year college to play a specific sport.

**Qualifications:**

1. Reside in one of the following Pee Dee counties: Chesterfield, Darlington, Dillon, Florence, Marion, Marlboro, or Williamsburg.
2. Be accepted to an accredited 4-year college or university.
3. GPA must be 2.5 or higher.

**Application process:**

1. The applicant must return an application by mail to Eastern Carolina Community Foundation, PO Box 1615, Florence, SC 29503 or by email to [info@easterncarolinacf.org](mailto:info@easterncarolinacf.org) by **March 31** with:
  - A personal statement as described on page 2.
  - Your most recent official transcript of grades.
  - Proof of acceptance to a 4-year college or university.
  - Provide 2 letters of reference from adults who are not family members (forms are included.)
    - **Athletic scholarship:** one of these letters must be a letter of support from a coach.
  - **Athletic scholarship:** provide proof of acceptance to play a specific sport in college.
2. **Incomplete applications will not be reviewed.** Decisions made by the committee are final.
3. The scholarship is for tuition expenses and will be paid directly to the institution the student plans to attend, not to an individual.



**Justin O'Connor Memorial Fund Scholarship at Eastern Carolina Community Foundation**

**Personal Statement of:** \_\_\_\_\_  
Applicant Name

Please check which O'Connor scholarship you are applying for:    \_\_\_ Academic    \_\_\_ Athletic

State why you are seeking this scholarship and how it will benefit your pursuit of education. Please include information about your honors and achievements, extracurricular activities, interests and community involvement. Address your experience, if applicable, with distracted driving.

\_\_\_\_\_  
Applicant Signature Date \_\_\_\_\_



**Scholarship Applicant Information**

Name: \_\_\_\_\_

Email Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Present Address: \_\_\_\_\_

Permanent Address: \_\_\_\_\_

Parent or Guardian's Name: \_\_\_\_\_

Address: \_\_\_\_\_

FAFSA Score (if required by scholarship qualifications): \_\_\_\_\_

SAT or ACT score (if applicable): \_\_\_\_\_

High School \_\_\_\_\_ Graduation date: \_\_\_\_\_

Name of institution of higher education you plan to and have been accepted to attend:  
\_\_\_\_\_

Address: \_\_\_\_\_

**References**

List two references below and provide a completed reference form for each of the persons listed with your completed application by the defined deadline. Do not list names for references of any persons who are related to you in any manner.

Name: \_\_\_\_\_

Name: \_\_\_\_\_

**Certification**

I authorize investigation of all statements contained in this application. I understand that misrepresentation of any information may prevent me from consideration in receiving this scholarship.

\_\_\_\_\_  
**Signature of Applicant**

\_\_\_\_\_  
**Date of Application**



**Scholarship Letter of Reference Form**

I, \_\_\_\_\_, am applying for the \_\_\_\_\_ Scholarship at Eastern Carolina Community Foundation. I authorize you to provide the Foundation with requested information about me.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

- 
1. How long have you known the applicant? \_\_\_\_\_
  2. What is your relationship to the applicant? \_\_\_\_\_
  3. Please describe the characteristics that you have observed in the applicant that would help him/her be successful as he/she pursues higher education.

4. Additional comments:

Reference name: \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date



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\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

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Signature

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Date