



Perrin R. Love Memorial Scholarship

Lexington Technology Center

Award \$300

Deadline: March 15, 201

This scholarship was established in loving memory of Perrin R. Love. Perrin was a devoted family man, a loyal friend and a community leader. His interest in the development of young people was exemplified by his participation as a youth baseball and soccer coach, participation on boards for Boy Scouts and The Boys and Girls Club, devoted service to Rotary Clubs (including Youth Exchange Programs and Scholarship Programs) and his long-standing service on the Lexington Technology Center School Improvement Council.

Perrin was a very energetic, optimistic and positive person. He accepted people for who they were, focused his energies on helping others and was active in many different organizations. He had a powerful ability to dream and to see “the big picture,” not getting tangled up in details. Perrin was outgoing, humorous, and friendly to all. He was also an avid supporter of the Lexington Community, its growth and development.

We want to recognize a Lexington Technology Center senior who demonstrates character traits similar to Perrin’s. Our hope is that the Perrin R. Love Memorial Scholarship will help recipients live life to the fullest, continue their education, and pursue their dreams.

~ Betsy Love, Josh Love and Jenny Love England

Eligibility Requirements

This scholarship is available for a Lexington Technology Center graduating senior who is or will be a Lexington Technology Center Program Completer, has at least a B average cumulative GPA and plans to continue his/her education at a recognized two- or four-year college, university or technical school in South Carolina.

General Rules

- Applicants will be judged on character, sincerity of purpose, and potential for success.
- The scholarship is issued “one time only” and is not renewable.
- The winner will be announced at the school’s Awards Night.
- The scholarship award will be paid directly to the institution of higher learning.

Application Process

Return your application packet to the Lexington Technology Center School Counseling Department on or before **March 15, 201** , with the following attachments:

- The completed application;
- Response to the following questions;
- An official academic transcript; and
- Two letters of recommendation – one from a teacher or coach and one from a community member (e.g., pastor or employer).



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Name: _____ Date of Birth: _____

Address _____

City _____ State _____ Zip _____

Telephone: _____ Email: _____

Parents'/Guardians' Names: _____

Parents'/Guardians' Occupations: _____

Number of brothers and sisters living at home: _____ Ages: _____

Number of brothers and sisters attending colleges/universities/technical schools: _____ Ages: _____

College, university, or technical school you plan to attend: _____

Anticipated area of study: _____

Have you submitted your application for admission? Yes ___ No ___

Have you been accepted to this institution? Yes ___ No ___

Are you planning to be a full-time or part-time student? _____

What portion of your college expenses do you expect to contribute? _____

What means will you use to contribute to your educational expenses? (Check all that apply)

Loans ___ Scholarships ___ Work ___

Other (explain) _____

Have you received other scholarships or grants? Yes ___ No ___

If yes, list the source(s) and the amount(s): _____

Which Lexington Technology Center program did you complete? _____

List memberships/involvement in school, community, church and/or civic organizations:

If you have been employed at any time while attending high school, list the name of your employer(s) and supervisor(s):

Please answer the following essay questions, limiting your responses to 1-3 pages total:

1. How has Lexington Technology Center influenced your life?
2. What is your strongest character trait and how will you use it in your future?
3. Why is Lexington a great place to live?

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- Responses to essay questions.

The information provided on this application will be kept confidential and will be used by the Foundation's scholarship selection committee to determine the scholarship recipient.

I have read and understand the conditions of the Perrin R. Love Memorial Scholarship as explained in the current scholarship application. I affirm that all information submitted in my application is accurate and true and that I agree to the terms of the scholarship, if it is awarded to me.

Signature of Applicant: _____ **Date:** _____