



South Carolina Association of Legal Investigators
“The Robert H. Joseph Scholarship Award”
APPLICATION

I. BACKGROUND INFORMATION

A. APPLICANT INFORMATION

Last Name: _____ First Name: _____ MI: _____

Address: _____

Telephone: _____ Email: _____

Social Media Accounts: _____

B. SCALI SPONSOR INFORMATION

Last Name: _____ First Name: _____ MI: _____

Address: _____

Telephone: _____ Email: _____

SCALI Member Since: _____

II. EDUCATION INFORMATION

A. HIGH SCHOOL INFORMATION

For each school attended, please provide the following information. If more than one, list most recent first.
(An official certified copy of applicant's transcript must be attached for each school attended)

High School Address/Telephone:	Dates of Attendance:	GPA:	Graduation Year:
1.			
2.			
3.			

B. Entrance Examination Results:

ACT Score: _____
Date Taken: _____

SAT Score: _____
Date Taken: _____

C. Please provide a copy of all college/university letters of acceptance.

D. College/University Information

For each school attended, please provide the following information. If more than one, list most recent first.
(An official certified copy of applicant's transcript must be attached for each school attended)

College/University Address/Telephone:	Dates of Attendance:	Major/Minor:	GPA:	Graduation Date or Projected Date:
1.				
2.				
3.				

III. FINANCIAL INFORMATION

A. How do you plan to pay for your education?

B. Scholarship Information:

Scholarship Name	Date Received	Renewal Terms	Amount
1.			
2.			
3.			

Note: Please attach additional sheets if you have attended more than three high schools, three colleges or universities, or received more than three scholarships.

C. Have you previously applied for a SCALI scholarship? _____

If so, when? _____ Did you receive a SCALI scholarship? _____

IV. ESSAY

A. Please type double-spaced, and number all essays and submit them electronically according to the instructions below. For each page included, please type your name and year of birth in the upper right-hand corner.

Essay:

In 600 words or less, describe why you feel deserving of a SCALI Scholarship. Include how your background, education and work experience (including any social, civic, or volunteer experience) along with your academic / career goals qualify you for a scholarship from this organization.

V. COURT RECORD

A. Have you ever been arrested or charged with any violation? _____ (List all such matters, even if not formally charged, no court appearance, found not guilty, or if the matter was settled by payment of fine or forfeiture of collateral)

Date:	Place:	Charge:	Final Disposition:	Details:
1.				
2.				
3.				

Submittal instructions:

Submit this form and all supporting forms to the SCALI Scholarship Committee. A link can be found at www.scalinv.com. Look under Membership then Bob Joseph Scholarship.

I hereby certify that the foregoing application is true and correct to the best of my knowledge. I authorize the publication of my photograph posted at the SCALI annual conference and on the SCALI website.

APPLICANT'S NAME _____

SIGNATURE: _____ Date: _____

SCALI Sponsor:

I have reviewed the foregoing application and have determined it to be true and correct to the best of my knowledge. I certify that the above applicant is my son/daughter/legal ward. I further certify that I am an active SCALI member in good standing and that my dues are paid in full to date.

SPONSOR'S NAME _____

SIGNATURE: _____ Date: _____