



2025 Kay Edwards Memorial Scholarship

SEMINOLE STATE COLLEGE PROFESSIONAL STAFF COUNCIL

About the Scholarship: The Seminole State College Professional Staff Council (PSC) provides a \$500 monetary scholarship to one or more SSC students enrolled in at least 3 hours during the summer session.

MINIMUM REQUIREMENTS FOR CONSIDERATION INCLUDE:

- A **cumulative GPA of 3.00 or higher.**
- Must have **completed at least 12 credit hours at SSC.**
- Submission of all application materials** to the scholarship committee **prior to 3rd Friday in April (April 18th).**
- The student chosen to receive the scholarship will be required to **complete a minimum of three credit hours during the summer session.**

MATERIALS REQUIRED BY THE SCHOLARSHIP COMMITTEE

- Completed Application Form
- Application Letter outlining **1. Why the student thinks he/she should be considered; 2. Why they are in need of this scholarship and how receiving it will help them achieve their academic goals; 3. What the student's career and/or life goals include.** Minimum of 250-500 words.
- SSC transcript
- Financial Award Letter

SELECTION PROCESS

- The PSC scholarship committee will evaluate all submitted materials.
- The PSC scholarship committee reserves the right to conduct interviews of the finalist.
- The Professional Staff Council will vote upon the finalist of the PSC scholarship committee's selection.

**THE PSC SCHOLARSHIP COMMITTEE WILL NOT REVIEW
APPLICATIONS THAT DO NOT SUBMITT ALL REQUIRED MATERIALS**

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Application

Name: _____ Mailing Address: _____
Email: _____ City, State, Zip: _____
Cell Phone: _____ Additional Contact Phone: _____

List any Honors, Academic Awards you have received. (i.e. Civic, Recognitions, or Commendations)

Please list Organization or Leadership positions, and any Extracurricular Activities in which you have participated.

References: List three references who can attest to your character and dedication to your studies and/or community. At least two of these references must be at Seminole State College. Your references may be contacted if you are selected for interview.

NAME	RELATION TO APPLICANT	TELEPHONE #	EMAIL

I, the undersigned, submit this application for consideration. I attest to the accuracy of the statements contained herein and included in supplementary material for consideration of my request for the Seminole State College Professional Staff Council Summer Scholarship. I understand that in order to receive the scholarship, I must complete a minimum of three credit hours of college coursework at Seminole State College during the summer for which I receive the scholarship.

Signature: _____ Date: _____

Return by delivery, post mail, email or fax to:
Seminole State College
Attn: Financial Aid Office
2701 Boren Blvd
Seminole, OK 74868
Email: finaid@sscok.edu Fax: 405-382-9579