

TRACY STARLING YATES Memorial Scholarship Award

TRACY STARLING YATES

Tracy Starling Yates had many close ties through family to the Lugoff and Elgin areas and was a graduate of Spring Valley High School, Class of 1991, furthering her education at Furman University, Class of 1995, and Grand Canyon University, Class of 2011. Education was very important to her, and she felt it was a crucial part of making a better future for herself and her family. Tracy was diagnosed with multiple myeloma cancer in 2017, and lost her battle in January of 2021, leaving behind a son in high school who knew the importance of furthering his education. Realizing that not all students are able to further their education after the loss of a parent or guardian to cancer, The Tracy Starling Yates Foundation was formed in January of 2023 in her memory to encourage youth to focus on their futures in spite of such a setback. The Tracy Starling Yates Foundation implemented the Tracy Starling Yates Memorial Scholarship upon its founding. One scholarship will always be awarded to a student at Spring Valley High School, where Tracy attended, and to a student at Lugoff-Elgin High School in honor of her family ties. Additional scholarships may also be provided to students attending a Midlands of South Carolina High School.

\$1,000 SCHOLARSHIP EACH YEAR

At least two scholarships with a value of \$1,000 will be awarded annually. Scholarships may be used for tuition and fees, room/board and books only, and are awarded at \$500 per semester for the 2025-2026 academic year. Any funds not used for these purposes must be returned by the college/university to The Tracy Starling Yates Foundation.

ELIGIBILITY REQUIREMENTS

Any student attending Lugoff-Elgin High School, Spring Valley High School, or a high school in a Midlands of South Carolina school district who plans to enroll in the freshman class of any institution of higher learning in any state may apply for this scholarship, with the understanding that the scholarship is to be used during the two semesters of the succeeding academic year. Children of board members of The Tracy Starling Yates Foundation are not eligible.

CRITERIA FOLLOWED IN MAKING AWARDS

In making awards, the following criteria will be given major consideration:

1. Loss of a parent or guardian to cancer
2. Evidence of academic standing, work experience, volunteerism, leadership, maturity and character
3. Clarity and force of Applicant's written statement

OTHER INFORMATION

Select Finalists may be interviewed.

DEADLINE FOR FILING APPLICATION

All applications must be filed with The Tracy Starling Yates Foundation on or before March 15. Award winners will be announced no later than May 15. Awards will be made payable to the institution of higher learning for the use of the scholarship recipient and paid at the beginning of the quarter or semester.

FOR MORE INFORMATION, CONTACT

Richard Starling
President and CEO, The Tracy Starling Yates Foundation
(702) 286-7895/tracystarlingyatesfoundation@gmail.com

APPLICATION FOR

**Tracy Starling Yates
Memorial Scholarship Award**

**APPLICATION MUST BE FILED WITH
THE TRACY STARLING YATES FOUNDATION
ON OR BEFORE MARCH 15**

Applicant's Name _____

Brief Statement concerning career for which you are preparing:

Signature of Applicant _____

Signature of Guidance Counselor _____

Application should be returned to your Guidance Counselor by March 1.

INSTRUCTIONS TO APPLICANT

1. Deliver three (3) Letters of Recommendation (Reference) Forms to Volunteer Organizations and/or Individuals with knowledge of volunteer work performed.
2. Enclose inside or following the Application Form, in order:
 - a. Instructions to Applicant Page
 - b. Extracurricular Activities Page
3. Complete the "WHY I DESIRE THE TRACY STARLING YATES MEMORIAL SCHOLARSHIP" page of this Application Form.
4. Secure all signatures as indicated on pages 1 & 2 of the Application Form.
5. Return the completed Application Form to your Guidance Counselor by March 1. (Guidance Counselor will file application with The Tracy Starling Yates Foundation on or before March 15.)

1. Name of Applicant _____ Telephone () _____
First Middle Last

2. Mailing Address _____
Street/Route City County Zip

3. E-Mail Address _____ Age _____

4. Date of Birth _____

5. Cumulative Grade Point Average _____

6. Institution planning to attend _____
Name Location

7. This is to certify that I have known _____ (applicant) for at least one semester. From this acquaintance and association, I certify that he/she is of good moral character. I further testify that the applicant has shown a definite interest in furthering his/her education and would be deserving of this award.

Principal _____ Teacher _____ Teacher _____

8. I certify that all information contained in this application is correct.

Signature of Applicant _____ Signature of Parent or Guardian _____

Date _____
Month/Day/Year

EXTRACURRICULAR ACTIVITIES

1. List the number of years you were a member of the following (or other) Clubs and Organizations. Also list any office held.

Boy Scouts/Girl Scouts () _____

Foreign Language Club () _____

Junior Civitan () _____

Chess Club () _____

Beta Club () _____

Computer/Technology Club () _____

Junior Beta Cub () _____

Drama Club () _____

Interact () _____

FHA or FFA () _____

National Honor Society () _____

Band () _____

Key Club () _____

Chorus () _____

FCA (Fellowship of Christian Athletes) () _____

Orchestra () _____

PAALS Club () _____

Honor Student () _____

Senior Superlative _____

Other(s) _____

2. Class Officer: _____
(Pres., VP, etc.) Freshman Sophomore Junior Senior

3. Community and/or Church Activities:

4. Athletics: List number of years participated in:

Basketball _____ Football _____ Track _____ Golf _____

Baseball _____ Tennis _____ Softball _____ Soccer _____

Volleyball _____ Wrestling _____ Swimming _____ Other _____

EXTRACURRICULAR ACTIVITIES
Continued

1. Are you employed? Yes _____ No _____ (Skip to #2)

Where _____

Number of Hours per week _____

Write a short history of your work experience:

2. Write a brief statement about your volunteer experiences:

**The Tracy Starling Yates Memorial Scholarship
Letter of Recommendation (Reference) A**

Please complete this section and forward to your reference.

Applicant's Name _____

School _____

This Reference is an opinion rating used solely with your application for the Tracy Starling Yates Memorial Scholarship. It will not become a part of your regular school records, nor will it be considered for any purpose other than for said scholarship. This Reference is confidential and will not be disclosed by any member of The Tracy Starling Yates Foundation Board of Directors to you or anyone on your behalf.

**THE SUBMISSION OF THIS APPLICATION SIGNIFIES
YOUR ACCEPTANCE OF THIS CONDITION.**

TO THE REFERENCE: You have been listed as a reference for the above-named applicant, applying for the Tracy Starling Yates Memorial Scholarship. We appreciate your cooperation in helping us evaluate his/her qualifications for this scholarship. Please scan and Email to tracystarlingyatesfoundation@gmail.com or mail this reference **before March 15** to:

The Tracy Starling Yates Foundation
1601 Assembly Street
Post Office Box 7754
Columbia, South Carolina 29202.

How long have you been in frequent contact with the applicant? _____

What is/was your relationship to the applicant? _____

PLEASE RATE THE APPLICANT ON THE CHECKLIST BELOW:

	Outstanding	Excellent	Good	Average	Below Average	Unsure
Community Awareness						
Educationally Motivated						
Family Values						
Kindness/Consideration of Others						
Motivated to Support Charitable Causes						
Stability/Confidence						

Your recommendation for the applicant for the Tracy Starling Yates Memorial Scholarship (Please check one):

_____ Very Highly Recommend
_____ Highly Recommend
_____ Recommend
_____ Recommend with Reservations
_____ Not Recommend

Summary Comments: We must select a relatively small number of students from a large pool of exceptional candidates. Can you tell us something about this student that makes this applicant truly exceptional?

THIS SECTION IS VERY IMPORTANT. (May attach a separate sheet if desired.)

Your Signature _____ Date _____

Your Name (Print) _____

Your Title _____

Contact Number and/or E-Mail: _____

*Please return this form no later than March 15, so that it may be included in the applicant's application packet. **DO NOT RETURN TO STUDENT.***

Return to:

The Tracy Starling Yates Foundation, 1601 Assembly Street, Post Office Box 7754, Columbia, South Carolina 29202 or scan and email to tracystarlingyatesfoundation@gmail.com

Thank you for your time and assistance!
**The Tracy Starling Yates Memorial Scholarship
Letter of Recommendation (Reference) B**

Please complete this section and forward to your reference.

Applicant's Name _____

School _____

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What is/was your relationship to the applicant? _____

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Community Awareness						
Educationally Motivated						
Family Values						
Kindness/Consideration of Others						
Motivated to Support Charitable Causes						

Stability/Confidence						
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Your recommendation for the applicant for the Tracy Starling Yates Memorial Scholarship (Please check one):

- ☐ Very Highly Recommend
☐ Highly Recommend
☐ Recommend
☐ Recommend with Reservations
☐ Not Recommend

Summary Comments: We must select a relatively small number of students from a large pool of exceptional candidates. Can you tell us something about this student that makes this applicant truly exceptional?

THIS SECTION IS VERY IMPORTANT. (May attach a separate sheet if desired.)

Your Signature _____ Date _____

Your Name (Print) _____

Your Title _____

Contact Number and/or E-Mail: _____

*Please return this form no later than March 15, so that it may be included in the applicant's application packet. **DO NOT RETURN TO STUDENT.***

Return to:

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Thank you for your time and assistance!

**The Tracy Starling Yates Memorial Scholarship
Letter of Recommendation (Reference) C**

Please complete this section and forward to your reference.

Applicant's Name _____

School _____

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How long have you been in frequent contact with the applicant? _____

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	Outstanding	Excellent	Good	Average	Below Average	Unsure
Community Awareness						
Educationally Motivated						
Family Values						
Kindness/Consideration of Others						
Motivated to Support Charitable Causes						

Stability/Confidence						
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Your recommendation for the applicant for the Tracy Starling Yates Memorial Scholarship (Please check one):

- ☐ Very Highly Recommend
☐ Highly Recommend
☐ Recommend
☐ Recommend with Reservations
☐ Not Recommend

Summary Comments: We must select a relatively small number of students from a large pool of exceptional candidates. Can you tell us something about this student that makes this applicant truly exceptional?

THIS SECTION IS VERY IMPORTANT. (May attach a separate sheet if desired.)

Your Signature _____ Date _____

Your Name (Print) _____

Your Title _____

Contact Number and/or E-Mail: _____

*Please return this form no later than March 15, so that it may be included in the applicant's application packet. **DO NOT RETURN TO STUDENT.***

Return to:

The Tracy Starling Yates Foundation, 1601 Assembly Street, Post Office Box 7754, Columbia, South Carolina 29202 or email to tracystarlingyatesfoundation@gmail.com

Thank you for your time and assistance!

WHY I DESIRE THE TRACY STARLING YATES MEMORIAL SCHOLARSHIP

(200 to 250 words – typed)

Additional Instructions

Please make sure your application is put together in the following order:

- | | |
|--------------------|--|
| Page 2 | Signature Page/Application Form – <i>Note that the application must be ready for pick up by no later than the March 15 deadline. If proper signatures are not in place, then your application cannot be considered.</i> |
| Page 3 | Instructions to Applicant Page |
| Page 4/5 | Extracurricular Activities Page |
| Copy of Transcript | |
| Page 12 | “Why I Desire The Tracy Starling Yates Memorial Scholarship” |
| Page 6-11 | References – <i>Note that three (3) references are required to be returned to The Tracy Starling Yates Foundation on your behalf and will be attached to your application from our office.</i> |

Criteria for judging the Tracy Starling Yates Memorial Scholarship Applications include the Written Statement of the Applicant, Volunteer Experience, Extracurricular Activities, Letters of Recommendation, and Appearance and Completeness of Application. Categories are weighted according to importance. Points will be deducted if your application is not submitted in the proper order as outlined above.

Applications should be returned to your Guidance Counselor’s Office before the **March 1 deadline**. A representative from The Tracy Starling Yates Foundation will pick up applications on March 15.