

Roger Hudson Memorial Scholarship
Tau Iota Iota Chapter of Omega Psi Phi Fraternity, Inc.
PO Box 697, St. George, SC 29477



March 23, 2026

Dear School Counselor,

Greetings on behalf of the **Tau Iota Iota Chapter of Omega Psi Phi Fraternity, Inc. Roger Hudson Memorial Scholarship Committee**. Brother Hudson was an educator for many years in Colleton and Dorchester counties, and he impacted the lives of so many. In memory of his many contributions to the local community, the Roger Hudson Memorial Scholarship was established, and we are pleased to present our 2026 Scholarship application.

This year the Chapter will award **two \$500.00 scholarships** to graduating seniors from the class of 2026. All applications will be screened based on evidence of financial need, GPA, class ranking, essay, letters of recommendation, and extra-curricular activities. We would like to present the scholarship award during your baccalaureate service for the graduating class of 2026.

The application and all materials must be postmarked by May 2, 2026, to be considered. Incomplete applications will be disqualified. The award will be dispersed upon verification of the student's college enrollment. The scholarship check will be made out to the student and the college and be mailed to the college registrar's office. The Roger Hudson Scholarship Fund reserves the right to withhold the scholarship if false or misleading information is submitted.

We are excited about this opportunity to provide this scholarship to students in our community and we appreciate your assistance in making sure they receive the information to apply. Please contact Tim Lewis, (704) 488-8623, or Matthew Ward, (843) 864-3042, to answer any questions or concerns you may have regarding our scholarship program **or email at us timlewis75@gmail.com**

Thank you for your assistance in helping us to facilitate our scholarship program in Mr. Hudson's memory.

Sincerely,

Timothy Lewis

Bro. Timothy Lewis
Scholarship Committee Chairman



Roger Hudson Memorial Scholarship

INSTRUCTIONS for APPLICANT

1. Attach the following to completed Application:

- (A) An **ESSAY** (500-word minimum & typed double-spaced). **Student's name should be on each page of essay.**

Essay Topic:

Describe why education and training is important for you to reach career goals and explain how the Roger Hudson Memorial Scholarship will impact your ability to achieve those goals.

- (B) An **ACCEPTANCE LETTER** from an accredited College, University or Technical College.

2. Two (2) **LETTERS OF RECOMMENDATIONS** to be completed and submitted by **one teacher and one person in your community not affiliated with your high school.**
3. The completed application **MUST** be **postmarked** by **May 2, 2026**. Please refer to the Scholarship Application Checklist to ensure the packet is accurate and complete before mailing. Incomplete applications will be disqualified.
4. Applications will be screened according to the following criteria and weighted %:
- a) Essay (20%)
 - b) Evidence of financial need (20%)
 - c) Class ranking and GPA (20%)
 - d) Recommendations (20%)
 - e) Curricular and extra-curricular activities (20%)
5. Send completed application with attachments to.

**Roger Hudson Memorial Scholarship Fund
Tau Iota Iota Chapter of Omega Psi Phi Fraternity, Inc.
PO Box 697, St. George, SC 29477**

Roger Hudson Memorial Scholarship
Tau Iota Iota Chapter of Omega Psi Phi Fraternity, Inc.
PO Box 697, St. George, SC 29477



Roger Hudson Memorial Scholarship Application
SCHOLARSHIP APPLICATION

Name: _____ Home Phone: _____ Cell _____

Address: _____ City: _____

State: _____ Zip Code: _____

Email Address (print clearly): _____

Date of Birth: _____ Sex: F ___ M ___ Race: _____

Name and address of school currently attending: _____

Name of School Counselor: _____ Phone: _____

Date of Graduation: _____

College/University in which applicant plans to enroll: _____

Acceptance Date: _____ Intended Major: _____

Mother/Guardian Name: _____ Occupation: _____

Father/Guardian Name: _____ Occupation: _____

Please indicate household yearly income before taxes (your personal income if supporting self and living away from family) \$ _____

List name(s) and age(s) of all dependent children in your family:

Name:	Age:
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____



Letter of Recommendation (Teacher's Form)

Applicant's Name: _____

How well do you know the applicant? (Please check one)

- Very well (More than one year)
 Fairly well (More than one semester)
 Not very well (Less than one semester)

Please evaluate the applicant using the statements provided below. Please check the statements, which best describe the applicant in relation to students, academics, and extra-curriculum activities. Please check only one response for each statement.

	Not Observed	Below Average	Average	Above Average
Makes friends easily.	_____	_____	_____	_____
Shows interest & concerns for the welfare of others.	_____	_____	_____	_____
Influences other students to work together.	_____	_____	_____	_____
Communicates effectively orally.	_____	_____	_____	_____
Communicates effectively in written work.	_____	_____	_____	_____
Sets an example of good conduct for other students.	_____	_____	_____	_____
Exerts maximum effort, showing a strong desire to achieve.	_____	_____	_____	_____
Shows self-control & performs well, even under pressure.	_____	_____	_____	_____
Adjusts to demanding schedule of activities without neglect to school work.	_____	_____	_____	_____
Seeks academic challenges beyond that required by normal course work.	_____	_____	_____	_____
Sets high standards for own performance in a number of areas and activities.	_____	_____	_____	_____
Accepts constructive criticism & makes improvements from it.	_____	_____	_____	_____
Accepts full responsibility for personal shortcomings.	_____	_____	_____	_____
Teaches practical skills to others.	_____	_____	_____	_____
Participates in extracurricular activities.	_____	_____	_____	_____
Serves in leadership capacity in school organizations.	_____	_____	_____	_____
Is an all-around good volunteer and individual?	_____	_____	_____	_____

Briefly explain why you think applicant should receive this award. _____

Teacher's Name: _____

Email Address: _____

Phone: _____

Teacher's Signature: _____ Date: _____



Letter of Recommendation (Individual in Community or Employer)

Applicant's Name: _____

How well do you know the applicant? (Please check one)

- Very well (More than one year)
 Fairly well (More than one semester)
 Not very well (Less than one semester)

Please evaluate the applicant using the statements provided below. Please check the statements which best describe the applicant in relation to students, academics, and extra-curriculum activities. Please check only one response for each statement.

	Not Observed	Below Average	Average	Above Average
Demonstrates interest in community.	_____	_____	_____	_____
Shows interest & concerns for the welfare of others.	_____	_____	_____	_____
Influences others to work together.	_____	_____	_____	_____
Communicates effectively orally.	_____	_____	_____	_____
Communicates effectively in written work.	_____	_____	_____	_____
Sets an example of good conduct for other/peers.	_____	_____	_____	_____
Exerts maximum effort, showing a strong desire to achieve.	_____	_____	_____	_____
Shows self-control & performs well, even under pressure.	_____	_____	_____	_____
Makes friends easily.	_____	_____	_____	_____
Is a positive role model.	_____	_____	_____	_____
Accepts constructive criticism & makes improvements from it.	_____	_____	_____	_____
Accepts full responsibility for personal shortcomings.	_____	_____	_____	_____
Teaches practical skills to others.	_____	_____	_____	_____
Seeks challenges beyond those normally required.	_____	_____	_____	_____
Eagerly volunteers to help.	_____	_____	_____	_____
Exhibits strong moral character.	_____	_____	_____	_____
Is an all-around good volunteer and individual.	_____	_____	_____	_____

Briefly explain why you think applicant should receive this award. _____

Evaluator's Name: _____

Email Address: _____

Phone: _____

Evaluator's Signature: _____ Date: _____



Club/Organization/Employment Form

List all school, community, church, clubs, organizations, and employment activities you have been involved in since your high school freshman year. **Sponsor's signature required for verification.**

Club/Organization or Activity	Date Involved	Office Held	Year(s) Office Held	Sponsor's Signature (REQUIRED)
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				

Use an extra sheet if necessary.

List all honors and awards received from school and community clubs, organizations, and activities. **Sponsor's signature required for verification and credit.**

Honor or Award	Date of Honor or Award	Counselor's or Sponsor's Signature (REQUIRED)
1.		
2.		
3.		
4.		
5.		

Use an extra sheet if necessary.



SCHOLARSHIP APPLICATION CHECKLIST

Please verify your application is accurate and complete by ensuring all information below is in your packet when mailed:

- ❑ Application signed and all information complete.
- ❑ 500-word minimum essay (typed double-spaced) enclosed. Student's name should be on each page of the essay.
- ❑ Letters of recommendation enclosed, signed, and completed by a teacher and an individual in the community.
- ❑ Acceptance letter from an accredited college, university, or technical college enclosed.
- ❑ Club/Organization form completed with dates of participation and all activities signed by your school counselor or sponsor.
- ❑ Official transcript enclosed including class rank and GPA.

REMINDER: Completed applications must be postmarked by May 2, 2026, to be considered for the scholarship. Incomplete applications will be disqualified.