

**VICTIMS' RIGHTS WEEK 2010
SCHOLARSHIP APPLICATION**

This form must be received by our office on or before March 31, 2010

The South Carolina Victim Assistance Network offers full and partial scholarships to victim/survivors of crime. To be considered for a scholarship, certain criteria must be met: 1) YOU MUST BE RECOMMENDED BY YOUR VICTIM ADVOCATE, & OBTAIN THEIR SIGNATURE ON YOUR APPLICATION. 2) YOU MUST ATTEND THE CONFERENCE IN IT'S ENTIRETY. Priority will be given to **FIRST TIME ATTENDEES**, although previous recipients may be considered depending upon availability of funding.

PLEASE HAVE ONLY ONE APPLICANT PER SCHOLARSHIP APPLICATION

NAME: _____

ADDRESS: _____

STREET

CITY

STATE

ZIP

()

PHONE NUMBER

EMAIL: _____

Have you ever received a scholarship to attend Victims' Rights Week? YES NO If yes, what year(s)? _____

Please indicate the date of victimization _____

How did you hear about this conference? Brochure Advocate Service Provider Media Other

I AM APPLYING FOR THE FOLLOWING ASSISTANCE:

Registration Fee and/or **Lodging:** Wednesday PM Thursday PM

I will arrive on **April 28, 2010** and depart on _____, **2010**

Room preferences: smoking non-smoking don't care

Roommate preferences: smoking non-smoking non-drinker don't care

Name of roommate preference / relationship: _____

I understand that I must complete and attach a Victims' Rights Week 2010 registration form.

APPLICATIONS FOR SCHOLARSHIPS WILL NOT PROCESSED WITHOUT A COMPLETED REGISTRATION FORM.

PLEASE RETURN BOTH COMPLETED FORMS TO:

SCVAN/VRW 2010

113 Executive Pointe Blvd., Suite 201

COLUMBIA, SC 29210

I further understand that lodging is only available to persons living outside a 50 mile radius of Greenville, South Carolina. I understand that all rooms are double occupancy.

SIGNATURE OF APPLICANT

DATE

Signature of your Victim Advocate (REQUIRED):

Print _____ **Sign** _____

STATUS OF AWARD (SCVAN USE ONLY)

Date Received _____ Approved by: _____ Denied by: _____ Reason: _____

AMOUNT AWARDED: Registration Fee _____ Lodging: _____ Total: _____ Award #: _____