



2025-2026 OPERATION HOPE, Inc.
Operation Hope Scholarship
206 East Rutherford St. Landrum, SC 29356
864-457-2812. ext. 101
director@operationhopelandrum.org

ASSIGNED # _____
RECEIVED: _____
MEETING: _____
NOTIFIED: _____

NAME: _____

ADDRESS: _____

CELL PHONE #: _____ (Preferably Student's Cell Number)

PARENT(S) NAME: _____

STUDENT PERSONAL EMAIL ADDRESS: _____

GRADUATING HIGH SCHOOL: _____

ELEMENTARY SCHOOL: _____

MIDDLE SCHOOL: _____

EXPECTED GRADUATION DATE: _____

COLLEGE, UNIVERSITY OR TECH SCHOOL ATTENDING FALL 2026: _____

PLANNED MAJOR: _____

HIGH SCHOOL ACTIVITIES: _____

COMMUNITY ACTIVITIES: _____

VOLUNTEER EXPERIENCE (Minimum 20 HOURS) _____

WORK EXPERIENCE:

ATTACH TWO LETTERS OF RECOMMENDATION:

ONE:

TWO:

Name: _____

Name: _____

Association: _____

Association: _____

I have to the best of my ability completed the application for the Operation Hope Scholarship. I would like to be considered for the 2025-2026 scholarship. Should I receive the scholarship, I understand the awarded scholarship occurs once at the beginning of my first year in college, university or tech school. I also understand that the money awarded is mailed directly to the bursa's office at the school I will attend in July of 2026. Thank you for your consideration.

Student Signature

Date

Parent Signature

Date