GENERAL INFORMATION
2019 APPLICATION AND PROGRAM

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SCCSA INFORMATION
Address: F153 Poole Agricultural Building, Clemson, SC 29634
Phone: (888) 472-5433 (tollfree) (864) 656-1534
Website: http://www.clemson.edu/cafls/sccsa.html
Email: sccsa-l@clemson.edu

PROGRAM DETAILS
Dates: July 20th-26th, 2019
The South Carolina Commissioner’s School for Agriculture (SCCSA) provides challenging and enriching
college-based experiences for a limited number of rising 11th and 12th grade students. Each college-
based program provides an academically focused curriculum that integrates subject matter from a variety
of related disciplines with the overall theme of agriculture and natural resources.

MISSION
SCCSA is a premiere career and leadership development summer program. This program is designed to
inform, inspire and challenge student participants to consider a career in the agricultural, natural resource
and life science industries as well as to be model citizens of leadership and influence for these industries
as they embrace an agriculturalist philosophy.

Academic Programs May Include:  Additional Programming May Include:
- Livestock and Animal Production  - Agribusiness & Policy
- Forestry & Natural Resources  - Agricultural Education
- Plant Sciences  - Clemson Admissions & Financial Aid
ELIGIBILITY
No exceptions are made to these requirements

- Currently a high school student in 10th or 11th grade. Must be on track to enter 11th or 12th grade.
- Home-schooled students are eligible.
- Genuine interest in pursuing a college degree related to agriculture and natural resources.
- Must not have previously attended the South Carolina Commissioner’s School for Agriculture.
- Must submit a completed application form and all related materials by the deadlines.

TUITION COSTS
Tuition:

South Carolina residents $375  Out-of-State residents $650

A non-refundable tuition deposit of $50 is required UPON ACCEPTANCE. This deposit is credited toward total tuition costs. Please do not send money with this application.

Through private funding and donations, the cost to South Carolina students has been kept to a minimum. Each student must provide his or her own spending money as well as transportation to and from Clemson University. All program participants are housed on the Clemson campus and all meals are provided. In the event a student cannot afford these expenses, we encourage students to find local sponsors. Applicants can also submit a letter to the program director requesting funding assistance.

APPLICATION PROCEDURES
Postmark Deadline
Completed applications are due electronically or postmarked by April 12th, 2019 or earlier. The application must be completed and all components must be received, according to the enclosed directions. Applications can be submitted through email or through mail, but must be postmarked by April 12th, 2019, then received by our office no later than April 26th, 2019 at 4:00pm to be considered. Applications received with a postmark later than April 12th, 2019 will be immediately disqualified.

All components of application must be received by April 26th for an application to be complete. Please allow your recommenders ample time to complete requirements.

Submitting Application
The applicant should complete applications in entirety and the work submitted should be your own. Applications and related materials can be, emailed, or submitted online. Related addresses are listed under General Information.

Notification
A selection committee reviews applications and approximately 35-40 students will be chosen to participate with an emphasis placed on students who desire to pursue studies or a career in the agriculture and natural resource industries. Once the selection process is complete, the student can expect to receive a letter announcing the decision by June.

DISCLAIMER
The South Carolina Commissioner’s School for Agriculture is not responsible for lost, incomplete or delayed applications, or those sent to incorrect addresses. The committee cannot respond to requests for advance notification, individual assessments, or appeals.

Once submitted, the contents of this application become property of the SCCSA program and its affiliates. Submissions may be duplicated and replicated at the discretion of the SCCSA Program Director. Applicant gives permissions for multimedia submissions to be used in future advertising for the SCCSA program.
PERSONAL DATA FORM

PART I: Applicant Information

Name of Applicant

<table>
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<th>Last</th>
<th>First</th>
<th>M.I.</th>
<th>Preferred</th>
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[ ] Male   [ ] Female

Address

PO Box, Street Number, Route

City
State
Zip

Home (area code + number)
e-mail Address

County
Local Newspaper

Students Date of Birth

Shirt Size

| XS | S | M | L | XL | XXL | XXXL |

How do you identify yourself? Information is confidential and used for statistical accounting.

[ ] African American   [ ] Asian   [ ] Bi-Racial/Mixed Race   [ ] Caucasian/White

[ ] Hispanic/Latino   [ ] Indian   [ ] Native American   [ ] Other ____________

[ ] Choose not to answer

PART II: School Information

I attend: (check one)

[ ] Public School   [ ] Private School   [ ] Home School

School District

Name of School District in which student resides

School

School student attends

School Address

PO Box, Street Number, Route

City
State
Zip

Graduation Year

________________________________________

Application Deadline: April 12th
PERSONAL DATA FORM - 2
This section can be replaced or supplemented by a resume

ACTIVITIES: (Can include athletic, academic, social and community)

HONORS AND AWARDS:

EMPLOYMENT & VOLUNTEER WORK:

How did you learn about the South Carolina Commissioner’s School for Agriculture?
☐ Magazine or Newspaper ☐ Website ☐ Advertisement
☐ Counselor/Teacher __________________________
☐ Previous Attendee ___________________________
☐ Other ______________________________________

APPLICANT’S STATEMENT AND SIGNATURE:
I certify that to the best of my knowledge all of the information I have provided is accurate and that the work submitted is my own. I acknowledge that information about my selection, photos and projects may be shared with the public. I also understand that it is my responsibility to return this form and the required attachments.

________________________________________________
Applicant Signature Date

PARENT/GUARDIAN’S STATEMENT AND SIGNATURE:
I have reviewed the information on this form and give my permission for my child to proceed with the application procedures. I authorize my child’s school and its employees to release any information necessary about this applicant. Furthermore, I recognize that it is my child’s responsibility to ensure that the complete application is filed in accordance with the stated deadline. I am aware that the South Carolina Commissioner’s School for Agriculture cannot respond to requests for individual assessments or appeals.

________________________________________________
Parent/Guardian Signature Date

Application Deadline: April 12th
### PARENT/GUARDIAN FORM

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<td>Alternative Contact Number</td>
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<th>Employment Info</th>
<th>Occupation</th>
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### Emergency Contact Information:

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### Health, Allergies, Disabilities, Dietary Restrictions:

Please provide any information the SCCSA staff should know about the applicant’s health, allergies, disabilities, dietary restrictions or related. *This information is strictly for early program planning purposes and will not influence the application decision. If applicant is selected, further documentation may need to be submitted.*

### Special Needs:

Please provide any information about any special needs that the SCCSA staff should be aware of. *This information is strictly for early program planning purposes and will not influence the application decision. If applicant is selected, further documentation may need to be submitted.*

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*The South Carolina Commissioner’s School for Agriculture is an intense living-learning experience for all participants. Participants should be able to handle the rigor and demands of the program academically, physically and emotionally. Any concerns by either participants or parent/guardians of the participant’s abilities to fulfill this statement should be discussed with the Program Director by calling (864) 656-1534.*

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Application Deadline: April 12th
The SCCSA planning committee will seek to accommodate students in their chosen academic field. To help us place you in the appropriate track and to create new programming, please rank the following areas relative to your interests.

Number your ranking 1 – 3 using each number ONLY ONCE using “1” as your first choice and “3” as your last choice. Please review the example ranking before completing your own.

EXAMPLE RANKING
_3_ Livestock and Animal Production
_1_ Forestry and Natural Resources
_2_ Plant Sciences

YOUR RANKING
___ Livestock and Animal Production
___ Forestry and Natural Resources
___ Plant Sciences

_______________________________________
Applicant’s Full Name
PERSONAL INTRODUCTION

Personal Introduction Instructions:
Applicants must prepare a video, photo slideshow, or other creative digital media that introduces the applicant to the selection committee. This introduction should present the applicants desire to participate in the program and can incorporate background, experiences, interests and/or goals.

Regardless of format, submissions cannot exceed 5-minutes with no minimum length requirement.

Any applicant not able to complete this requirement can contact the SCCSA Director for guidance. Questions can be directed to the SCCSA Director.

Submitting Files:
For video and slideshow submissions, file formats accepted include MOV, MPEG, MP4, DVD, or YouTube. Submissions can be mailed along with application or submitted electronically to sccsa-1@clemson.edu.

Disclaimer:
Once submitted, the contents of this application become property of the SCCSA program and its affiliates. Submissions may be duplicated and replicated at the discretion of the SCCSA Program Director. Applicant gives permissions for multimedia submissions to be used in future advertising for the SCCSA program.

For more information - www.clemson.edu/cafls/sccsa
For any questions, contact - (864) 656-1534
CURRENT ISSUES ESSAY

Current Issues Essay:
Discuss a current issue in agriculture or natural resources that is of specific interest. This can be a positive or negative issue related to these industries. It is important to state more than just facts and to incorporate ideas, solutions, concerns, or other thoughts.

Format:
Applicants should respond to this requirement using typed/word-processed, in an easy to read 12-point font. The essay should employ the applicant’s best-written skills, reflect personal interests, and the writer should be conscious of utilizing resources. This statement should be clear and concise and can be either informative or persuasive. Essay must not exceed two typed pages. Each essay will be thoroughly reviewed and checked for plagiarism. Essays are required to follow standard MLA or APA format, providing reference to any resources utilized.

Essay Review:
Essays will be reviewed based on the following criteria:
1. Technical Content (spelling, grammar, sentence structure)
2. Content
3. Overall Quality
4. Creativity

Submitting Files:
Essays can be submitted along with application in hard copy or can be submitted electronically to scsaa-l@clemson.edu, preferred file type is Adobe PDF.

Disclaimer:
Once submitted, the contents of this application become property of the SCCSA program and its affiliates. Submissions may be duplicated and replicated at the discretion of the SCCSA Program Director. Applicant gives permissions for submissions to be used in future advertising for the SCCSA program.

For more information - www.clemson.edu/cafls/sccsa
For any questions, contact - (864)656-1534
SCHOOL COUNSELOR REVIEW & RECOMMENDATION

Review & Recommendation Guidelines:
1. Who may complete this form: High School Guidance Counselor Only
   * Homeschool applicants should use association representative or seek advice for special situations.
2. Please complete this form and return it immediately to the student in a sealed and signed envelope.
   * Application materials are due April 12th, 2019.
3. The application will be disqualified if it is late or incomplete. This form expires April 12th, 2019.
4. Visit the SCCSA website to submit electronically: www.clemson.edu/cafls/sccsa
   * For information, contact (864)656-1534 or sccsa-l@clemson.edu

Applicant’s Name: ___________________________ School: ___________________________
Counselor Name: ___________________________ Date: ___________________________

PART I: Academic Scores and Standing
Complete the following information as thoroughly as possible, even if it appears on the transcript. Please report actual scores and not percentiles. Although it is not a required that the student have completed any standardized tests to attend the program, please provide explanation if scores are not available.

Class Rank _______ Class Size_______ Grade Point Average_______ Scale_______
Test Scores:
   PSAT: Verbal/Critical Reading_______ Writing_______ Math_______ Date_______
   SAT: Verbal/Critical Reading_______ Writing_______ Math_______ Date_______
   PLAN: Composite Score_______ Date_______
   ACT: Composite Score_______ Date_______
Comments: ________________________________________________________________

How would you describe this student’s course of study within the offerings at your school?
☐ Basic    ☐ Fairly Demanding    ☐ Very Demanding    ☐ Most Rigorous Available

PART II: Attendance Record
Total absences in last academic year: ___________ Total to-date this academic year: ___________
* If excessive, please explain the circumstances in Part V.

Total tardies in last academic year: ___________ Total to-date this academic year: ___________
* If excessive, please explain the circumstances in Part V.

PART III: Disciplinary Record
Has this student ever been suspended, expelled or placed on disciplinary or academic probation at your school?
☐ Yes  ☐ No  * If yes, please explain the circumstances in Part V.
Part IV: Counselor Recommendation

Please check one selection below to indicate your recommendation of this applicant for an intense academic summer program at Clemson University

- Highly Recommend
- Recommend
- Recommend with Reservations
- Do Not Recommended

Do you have any reason to question this applicant’s academic or personal integrity?  

☐ Yes  ☐ No

*If yes, please explain your reasons in Part V.*

Part V: Counselor Statement

Please provide a statement about this applicant’s strengths and weaknesses, explaining why you rated the applicant as you did in Part IV. Please cite examples of outstanding contributions, achievements challenges or concerns. Your response is important and will assist the selection committee in understanding the applicants.

☐ Please check here if you are attaching a letter.
Part VI: Transcript
Please include an official copy of the applicant’s transcript.

Part VII: Counselor Signature
The information I have provided is complete and correct. I have read the Recommendation & Review Guidelines and the Program Background. I understand that the applicant can be disqualified on the basis of grade level ineligibility, previous SCCSA participation, plagiarism or falsification of information.

Signature: ___________________________ Date: ____________

PROGRAM BACKGROUND
It is important that all persons providing reference understand the purpose and goals of the program. Please ensure that you give the highest recommendations only to students who you feel will excel in and benefit from such a program.

The South Carolina Commissioner’s School for Agriculture (SCCSA) provides challenging and enriching college-based experiences for a limited number of rising 11th and 12th grade students. Each college-based program provides an academically focused curriculum that integrates subject matter from a variety of related disciplines with the overall theme of agriculture and natural resources. The goal of the program is to nurture participant’s interest to therefore encourage higher education and career opportunities in the agricultural and natural resources.

Furthermore, the South Carolina Commissioner’s School for Agriculture is an intense living-learning experience for all participants. Participants should be able to handle the rigor and demands of the program academically, physically and emotionally. Any concerns of the applicant’s abilities to perform should be addressed in the recommendation.

For more information - www.clemson.edu/cafls/sccsa
For any questions, contact - (864)656-1534
### South Carolina Commissioner’s School for Agriculture

### SCIENCE TEACHER RECOMMENDATION

<table>
<thead>
<tr>
<th>Recommendation Guidelines:</th>
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<tr>
<td>1. Who may complete this form: A teacher in any subject considered “science” that has had the applicant in a class or as an advisee. Preference is given to Biology, Chemistry, Physics and Environmental Sciences. The choice of reference is the applicant’s. The applicant need not be studying with the reference at present; however, the student should be careful to choose someone who can best and most completely answer all questions. Parents or legal guardians may not complete. Homeschooled students should call for advice.</td>
</tr>
<tr>
<td>2. Agriculture Teachers not eligible in this category.</td>
</tr>
<tr>
<td>3. Please complete this form and return it immediately to the student in a sealed and signed envelope. Application materials are due April 12th, 2019. The application will be disqualified if it is late or incomplete.</td>
</tr>
<tr>
<td>4. Visit the SCCSA website to submit electronically: <a href="http://www.clemson.edu/cafls/sccsa">www.clemson.edu/cafls/sccsa</a></td>
</tr>
</tbody>
</table>

Applicant’s Name: ___________________________  Reference Title: ___________________________

Reference Name: ___________________________  Organization: ___________________________

### PART I: How does the applicant compare in overall promise with other youth whom you have interacted with throughout your career? Please check one statement below:

- [ ] Top 1%
- [ ] Top 10%
- [ ] Top 50%
- [ ] Top 5%
- [ ] Top 20%
- [ ] Other: ________________

### PART II: Please indicate the level of your recommendation of the applicant for the South Carolina Commissioner’s School for Agriculture. Please check one statement below:

- [ ] Highly Recommend
- [ ] Recommend
- [ ] Recommend with reservations
- [ ] Do Not Recommend

### PART III: Please rate the applicant in the indicated abilities or characteristics to the best of your knowledge and provide evidence of specific occasions or incidents that you feel illustrate this behavior in the individual.

1. **Maturity**—aware of correct time and place for behaviors in situations with peers, mentors and professionals.

   - [ ] Top 1%
   - [ ] Top 5%
   - [ ] Top 10%
   - [ ] Top 20%
   - [ ] Other: ________________

   Provide Example/Comments:
   __________________________________________________________________________________
   __________________________________________________________________________________

2. **Collaboration with Peers**—Is able to interact with peers in a respectful and effective manner to accomplish tasks.

   - [ ] Top 1%
   - [ ] Top 5%
   - [ ] Top 10%
   - [ ] Top 20%
   - [ ] Other: ________________

   Provide Example/Comments:
   __________________________________________________________________________________
   __________________________________________________________________________________
   __________________________________________________________________________________
3. Demonstrated Leadership – Willing to lead when appropriate or as needed.
   □ Top 1%   □ Top 5%   □ Top 10%   □ Top 20%   □ Other: _____________
   Provide Example/Comments:
   ____________________________________________________________________
   ________________________________________________________________

4. Enthusiasm towards Learning – Desires to learn; develops appropriate and thoughtful questions
   □ Top 1%   □ Top 5%   □ Top 10%   □ Top 20%   □ Other: _____________
   Provide Example/Comments:
   ____________________________________________________________________
   ________________________________________________________________

5. What makes this candidate unique among his/her peers?
   ____________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________

6. Have you observed a time when this individual has overcome a challenge or difficulty? What was it and how was he/she able to succeed?
   ____________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________

7. Please include any additional comments or information about this candidate you feel would be of value for the committee to consider. Please list any concerns you may have.
   ____________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________

Part V: Science Teacher Signature
The information I have provided is complete and correct. I have read the Recommendation & Review Guidelines and the Program Background. I understand that the applicant can be disqualified on the basis of grade level ineligibility, previous SCCSA participation, plagiarism or falsification of information.

Signature: ____________________________________________________________ Date: _____________

Application Deadline: April 12th
COMMUNITY LEADER RECOMMENDATION

Recommendation Guidelines:
1. Who may complete this form: Any representative from the community who knows the applicant and can comment on their character and abilities. Past examples include: industry representative, employer, mayor, fire chief, pastor, troop leader, 4-H advisor, FFA advisor, district commissioner, etc. The choice of reference is the applicant’s.
2. Please complete this form and return it immediately to the student in a sealed and signed envelope. Application materials are due April 12th, 2019. The application will be disqualified if it is late or incomplete.
3. Visit the SCCSA website to submit electronically: www.clemson.edu/cafls/sccsa
   For information, contact (864)656-1534 or sccsa-l@clemson.edu

Applicant’s Name: ________________________ Reference Title: ________________________
Reference Name: ________________________ Organization: ________________________

PART I:
How does the applicant compare in overall promise with other youth whom you have interacted with throughout your career? Please check one statement below:

☐ Top 1%          ☐ Top 10%          ☐ Top 50%
☐ Top 5%          ☐ Top 20%          ☐ Other: __________

PART II:
Please indicate the level of your recommendation of the applicant for the South Carolina Commissioner’s School for Agriculture. Please check one statement below:

☐ Highly Recommend  ☐ Recommend  ☐ Recommend with reservations  ☐ Do Not Recommend

PART III:
Please rate the applicant in the indicated abilities or characteristics to the best of your knowledge and provide evidence of specific occasions or incidents that you feel illustrate this behavior in the individual.

1. Maturity—aware of correct time and place for behaviors in situations with peers, mentors and professionals.
   ☐ Top 1%          ☐ Top 5%          ☐ Top 10%          ☐ Top 20%          ☐ Other: __________
   Provide Example/Comments:
   __________________________________________________________________________
   __________________________________________________________________________
   __________________________________________________________________________

2. Collaboration with Peers—Is able to interact with peers in a respectful and effective manner to accomplish tasks.
   ☐ Top 1%          ☐ Top 5%          ☐ Top 10%          ☐ Top 20%          ☐ Other: __________
   Provide Example/Comments:
   __________________________________________________________________________
   __________________________________________________________________________
   __________________________________________________________________________
3. Demonstrated Leadership – Willing to lead when appropriate or as needed.
   
   □ Top 1%    □ Top 5%    □ Top 10%   □ Top 20%   □ Other: ____________
   
   Provide Example/Comments:

   __________________________________________________________

   __________________________________________________________

   __________________________________________________________

4. Enthusiasm towards Learning – Desires to learn; develops appropriate and thoughtful questions

   □ Top 1%    □ Top 5%    □ Top 10%   □ Top 20%   □ Other: ____________

   Provide Example/Comments:

   __________________________________________________________

   __________________________________________________________

   __________________________________________________________

5. What makes this candidate unique among his/her peers?

   __________________________________________________________________

   __________________________________________________________________

   __________________________________________________________________

6. Have you observed a time when this individual has overcome a challenge or difficulty? What was it and how was he/she able to succeed?

   __________________________________________________________________

   __________________________________________________________________

   __________________________________________________________________

7. Please include any additional comments or information about this candidate you feel would be of value for the committee to consider. Please list any concerns you may have.

   __________________________________________________________________

   __________________________________________________________________

   __________________________________________________________________

Part V: Community Leader Signature

The information I have provided is complete and correct. I have read the Recommendation & Review Guidelines and the Program Background. I understand that the applicant can be disqualified on the basis of grade level ineligibility, previous SCCSA participation, plagiarism or falsification of information.

Signature: ____________________________________________ Date: ____________