



### 2025-2026 Scholarship

**Deadline: Friday, April 17, 2026**

#### **Eligibility Requirements**

- There is no minimum GPA requirement to apply.
- Applicant must be or will be a high school graduate in Greenville County in the 2025-2026 school year.
- Applicant must have a full/half/step sibling living with him or her in the household who has a diagnosed disability, including but not limited to physical, intellectual, developmental, sensory, neurological, or mental health disabilities.
- Applicant must be enrolling in or attending college in the 2026-2027 school year.
- Applicant must follow all directions listed below to be considered.

The Upstate Estate Law Scholarship will be awarded to the applicant who, in the judgment of Attorney Christopher L. Miller and staff, appears most deserving based on the scholarship criteria. **A one-time \$1000.00 scholarship will be awarded to a student from Greenville County. The scholarship will be awarded as a check paid from the Firm directly to the winning applicant, unless the Firm is requested to direct the payment elsewhere.**

1. Applicant must complete the attached scholarship application.
2. Applicant must submit one (1) personal recommendation from an instructor, counselor, club advisor, coach, church leader, or employer. You may reuse a recommendation used for college applications.
3. Applicant must submit one (1) response totaling 600-800 words to any one of the following three prompts:
  - a. How has having a sibling with a disability affected your future goals? Describe how growing up with a sibling with a disability has shaped your aspirations, career plans, or personal ambitions. Consider ways this experience has influenced what you want to accomplish in college and beyond.
  - b. What life lessons have you learned from growing up with a sibling with a disability? Reflect on the personal growth, empathy, resilience, or understanding you have gained. Share specific experiences that taught you valuable lessons about family, patience, or perspective.

- c. How has having a sibling with a disability challenged or shaped your ability to lead among your peers? Discuss ways your experiences have influenced your leadership skills, teamwork, or ability to advocate for others. Highlight moments where you had to take initiative, set an example, advocate for others, or inspire those around you.
4. The applicant packet consisting of the scholarship application, essay, personal recommendation, and a signed copy of the release on Page Five (5) are all due to Upstate Estate Law by Friday, April 17, 2026, at 4:30 p.m. The packet must be in “hard copy” form and delivered to our office location:

1200 Woodruff Road, Suite A3  
The Office Centers  
Greenville, SC 29607
5. Scholarship recipients will be asked to provide a photograph to be added to the company website and to share with media.
6. Upstate Estate Law will not release, in any circumstances, the applicant’s application, personal recommendation, or essay, to any party or person other than the applicant, unless compelled by a valid subpoena.



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Please print in ink or type.

Essay Word Count: \_\_\_\_\_

*Information about You:*

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Birthdate: \_\_\_\_\_

*Information about Education*

High School: \_\_\_\_\_

GPA: \_\_\_\_\_

Class Rank: \_\_\_\_\_

Intended College: \_\_\_\_\_

Intended Major: \_\_\_\_\_

School Activities: \_\_\_\_\_

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What do you do for fun outside of school, sports, and/or school activities?

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How did you hear about the Upstate Estate Law Scholarship?

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***I certify that the information contained in this application is true and accurate and that the essay was composed entirely by me, the undersigned. Furthermore, I understand that this application will not be processed if incomplete or submitted without all the required information by the specified deadline. By signing this application, I hereby consent to allow Upstate Estate Law, PC, to use any and all information provided in this application for purposes of public recognition and waive my right to any claim based on such release of the provided information.***

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_