

The Frank Pasdon Memorial Scholarship Fund

of The Luzerne Foundation

Eligibility Criteria

(as of 1/24/2017)

The Frank Pasdon Memorial Scholarship Fund was established by family and friends of Frank Pasdon to thank the residents of the greater Jim Thorpe area who, as customers to the Jim Thorpe Market, allowed the success of the business. The scholarship fund will support qualified students from the area who meet the following eligibility criteria:

- The applicant must reside in the geographic area served by the Jim Thorpe School District. However, the student may attend any public, private or parochial high school, as well as “home schooled students,” who have satisfied the requirements for a high school diploma.
- The applicant must pursue advanced post high school education at a recognized university, college, career training center, vocational training institution, etc.
- The applicant must show a consistent history of community volunteerism and/or work experience during his/her high school years.
- The applicant must complete the full Frank Pasdon Memorial Scholarship application and provide requested letters of reference from two or more non-family members.
- The applicant must submit a brief essay on why this scholarship is important to him/her and how it might help them achieve their long-term life goals.
- The successful applicant must remain a student in good standing and maintain a minimum 2.75 Grade Point Average on a 4.0 scale.
- The application will not be considered complete until all required materials have been received at The Luzerne Foundation on or before the publicized due date. Any materials after the due date will be considered invalid and the application null and incomplete.
- An official transcript from your present or most recently attended school.
- High school students should also enclose a copy of their ACT and/or SAT test scores, if available.
- A personal statement in 2 pages or less, typed, 12 pitch with one inch margins all around. Your statement should include information that would help us in knowing you and in determining your eligibility or need (example: challenges in your life experience and long-range plans after graduation; how you are financing your education; reasons for choosing your professional goals - e.g. the arts, education, medical profession, business, etc.).
- The importance and lessons learned through your work experience and/or volunteer extracurricular activities.
- Letters of recommendation from non-family members (e.g., teachers, clergy, employers, etc.) At least two (2) letters are advisable.
- A copy the EFC – Expected Family Contribution confirmation page from your FAFSA Application).

The Frank Pasdon Memorial Scholarship is for a single academic year and non-renewable. One half of the scholarship will be paid to the school in July and, upon confirmation of grades and continued attendance, the second portion will be distributed in January. The payment **must** go to the school, not the student.

Based upon additional contributions and/or long-term market appreciation of the endowment, and at the donor’s sole discretion; the scholarship amount, the renewability and number of scholarships may be changed over time.

FRANK PASDON MEMORIAL SCHOLARSHIP FUND
Of THE LUZERNE FOUNDATION
APPLICATION FOR SCHOLARSHIP

APPLICANT INFORMATION – This completed and signed application must accompany the requested information and documentation, personal statement, letters of recommendation, etc. as stated in the Scholarship Criteria.

Application Deadline is April 3, 2017

Please use additional sheets as necessary. Please print using dark ink.

Name: _____
First Middle Last

Permanent Address: _____
Street City State Zip

Date of Birth: _____ Male ☐ Female ☐ Social Security #: xxx-xx-_____

Permanent Phone #: _____ Mobile Phone #: _____ Other Phone #: _____

E-Mail: _____ Carbon County resident? ☐ Yes ☐ No

High School: _____ Graduation Date: _____

FAMILY INFORMATION (Provide the following information where applicable.)

Name of father/stepfather/guardian: _____ Primary Ph #: _____

Address: _____
Street City State Zip

Name of mother/stepmother/guardian: _____ Primary Ph #: _____

Address: _____
Street City State Zip

Check if applicable: () father deceased () mother deceased () parents divorced

Name of spouse: _____ Primary Ph #: _____

Address: _____
Street City State Zip

COLLEGE/UNIVERSITY/ADVANCED EDUCATION INFORMATION

Year in college during the upcoming academic year: () Fr () Soph () Jr () Sr () Grad

College you are planning to attend _____

Address (City/State) of college: _____

Full-time student? ☐ Yes ☐ No If no, # of credits _____

Intended Major Field of Study, if any: _____

Name of Applicant: _____

(Please PRINT your name.)

SCHOOL AND COMMUNITY ACTIVITIES

Using only the space below, list extracurricular, volunteer, community and religious activities in which you have participated during the past 4 years. *Please list the activities in order of importance to you.*

Activity	# of Years	Leadership Positions, Awards & Recognition

WORK EXPERIENCE

Using only the space below, please list your paid work experience during the past four years, *beginning with your most recent position.*

Employer	Nature of Work	Dates of Employment	Hrs/Wk	Phone

CERTIFICATION

I hereby affirm that the information provided on this form is accurate and complete to the best of my knowledge.

Applicant's Signature_____
Date

Name of Applicant: _____

(Please PRINT your name.)

Have you applied for or received other scholarships or financial assistance?

Organization _____ Amount applied for _____ Received _____

Organization _____ Amount applied for _____ Received _____

*** REQUIRED ATTACHMENTS ***

In addition to this three-page application form, your application packet must contain:

1. An official transcript from your present or most recently attended school. High School students should also enclose a copy of your ACT and/or SAT test scores, if available.
2. A personal statement in 2 pages or less, typed, 12 pitch with one inch margins all around. Your statement should include information that would help us in knowing you and in determining your eligibility or need (example: your involvement with St. Ignatius Parish and other community activities; how you are financing your education; previous work experience; reasons for choosing your professional goals - e.g. the arts, education, medical profession, etc.; challenges in your life experience and long range plans after graduation).
3. A list of your extracurricular activities in chronological order.
4. Two (2) Letters of recommendation from adults who are non-family members (e.g., teachers, clergy, employers, etc.) and One (1) from a representative of the church community.
5. A copy the EFC – Expected Family Contribution from the confirmation page of your FAFSA report. (A complete copy of your *Student Aid Report* (SAR) must be available upon request).

I hereby give The Luzerne Foundation permission to contact any of my teachers, supervisors, professional and educational institutions I have attended, applied to, have been accepted for admission or membership to, for further information about my attendance, performance, financial circumstances and references. I understand that the information contained in my application may be shared with the scholarship advisory committee and /or scholarship sponsor. I acknowledge that all materials submitted in this application become the property of the Luzerne Foundation and will not be returned to sender.

Applicant's signature _____ Date _____

Parent/Guardian/Spouse signature _____ Date _____

ALL SCHOLARSHIPS AWARDED MUST BE CLAIMED BY AUGUST 31, 2017.

How did you hear about our scholarships? School _____ Newspaper _____

Web Site (give URL) _____ Other _____

Scholarship Application DEADLINE is April 3rd, 2017. Return form to:

**Scholarship Processing
The Luzerne Foundation
140 Main Street, 2nd Floor
Luzerne, PA 18709**

Please contact The Luzerne Foundation at 570.714.1570 or 1-877.589.3386 with any questions.