This scholarship was established by family and friends of First Lt. Jeffrey F. DePrimo in his honor and memory and is awarded annually to a student who best meets the established eligibility criteria listed below.

Jeffrey loved music of all types, but he also loved his community and his country. He paid the ultimate sacrifice when he was killed while serving his country in Afghanistan on May 20, 2008.

The nonrenewable scholarship award of approximately $1,000 is awarded in the spring of 2020 and paid in two parts over the 2020-2021 academic year.

**Eligibility Criteria:**

- Graduate of either Pittston Area High School, Wyoming Area High School or a student residing in either of these two school districts but attending Holy Redeemer High School, or being homeschooled.
- Preferably, but not limited to, a student who loves music and is actively involved in any type of organized musical program including band, orchestra, impromptu musical ensembles and even “garage bands.”
- A student actively involved in his or her community through volunteer service to others.
- At least one relative of the candidate must be currently serving in the military or a veteran of any branch of the armed forces serving in any capacity. This person could be a parent, grandparent, great grandparent, great, great grandparent, aunt, uncle, or cousin, living or deceased.
- A hard-working student producing to the best of his or her academic ability.
- Demonstrating financial need
- Planning to enroll as an undergraduate in an accredited two or four-year college/university as a full-time student (a minimum 2.5 average GPA out of a 4.0 scale must be maintained during the year the scholarship is received.)

**Application Information:**

The following must be returned to The Luzerne Foundation by *March 27, 2020*:

- The completed DePrimo Scholarship Application (Typed or clearly printed using dark ink and signed as required)
- An essay on why you merit this scholarship through music appreciation, community service, etc. Do mention the family member who is currently serving or who has served in the military (The essay should not exceed two typewritten, double-spaced pages, 12 pitch font with one inch borders.) Please sign and date your essay.
- A copy of the confirmation page of your “Free Application for Federal Student Aid” (FAFSA) report stating your Expected Family Contribution (EFC). **Please note:** A *complete* copy of your Student Aid Report (SAR) may be requested, but is not required upon application submission.
- An official academic transcript from your present or most recently attended school as well as a copy of your ACT and/or SAT test scores, if available.
- 2 letters of recommendation from non-family members (e.g., teachers, clergy, employers, etc.)
APPLICANT INFORMATION – This application must accompany the requested information, documentation, and/or letters of recommendation, etc. as stated in the Scholarship Criteria. Please print using dark ink.

Name: ________________________________________________________________________
First    Middle    Last

Permanent Address: _____________________________________________________________
Street   City   State Zip

Date of Birth: _______________ Male__   Female__ Social Security # (last 4) __________

Telephone #:______________   Cell Phone#: _____________  Other Phone #: ______________

E-Mail: __________________________________ Luzerne County resident? ___Yes ___No

High School: ___________________________ Graduation Date: ______________

FAMILY INFORMATION
(Provide the following information where applicable.)

Name of father/stepfather/guardian: ___________________________________________

Address: ________________________________________________________________
Street   City   State   Zip

Name of mother/stepmother/guardian: _________________________________________

Address: ________________________________________________________________
Street   City   State   Zip

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

Name of spouse: __________________________________________________________

Address: ________________________________________________________________
Street   City   State   Zip

COLLEGE/UNIVERSITY INFORMATION

Year in college during the coming academic year:  Frsh ( )  Soph ( )  Jr ( )  Sr ( )  Grad ( )

College you are planning to attend: ___________________________________________

Address (City/State) of college: ___________________________

Full-time student? Yes ______ No ______ If no, # of credits________________

Major Field of study if any: ____________________________________________
Name of Applicant: ____________________________________________________________
(Please PRINT your name.)

Name of High School Attending: (check one)  □ Pittston Area  □ Holy Redeemer  □ Wyoming Area

Planning to Attend: (Name of educational institution) __________________________________________

Major: ____________________________________________________________________________

SCHOOL AND COMMUNITY ACTIVITIES
Please list extracurricular, including organized musical groups and/or bands, community and
religious activities in which you have participated during the past 4 years. Use additional sheets if
necessary.

<table>
<thead>
<tr>
<th>Activity</th>
<th># of Years</th>
<th>Leadership Positions, Awards &amp; Recognition</th>
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WORK EXPERIENCE
Please list your paid work experience during the past four years, beginning with your most recent
position.

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<thead>
<tr>
<th>Employer</th>
<th>Nature of Work</th>
<th>Dates of Employment</th>
<th>Hrs/Wk</th>
<th>Phone</th>
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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 ______________________

Page 2 of 3
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 ________

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 __________

Scholarship Application **DEADLINE is Friday, March 27, 2020.**

Return completed scholarship packet to:

Scholarship Processing
The Luzerne Foundation
34 South River Street
Wilkes-Barre, PA 18702

Please contact The Luzerne Foundation at 570-822-2065 with any questions.