This scholarship shall be awarded annually to a student planning to attend Luzerne County Community College to study any type of course offering from college degree curriculum to trade skills. The Ferrell Scholarship is intended to augment, not to replace scholarship funding from other sources. The scholarship may only be used for direct education expenses including tuition, books, labs, etc. but not for living, transportation or any non-academic expenses.

Eligibility Criteria:

- Students who expect to graduate within the current calendar year or have graduated within the past ten years from any of the Wilkes-Barre Area School District public high schools including Wilkes-Barre Area Vo-Tech;
- Student proving financial need;
- Students who have resided in Wilkes-Barre and/or Luzerne County for at least five (5) years;
- Students who have shown that they have succeeded beyond what their life situation may have indicated including physical or emotional difficulties;
- Students who understand the importance of an education and who are dedicated to improving themselves through continuing education and skills training.

Application Information:

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

- One copy of the Scholarship Application (Typed or clearly printed using dark ink):
- A personal statement in 2 pages or less, typed, 12 pitch with one inch margins. Your statement should address why you feel you merit this scholarship and should include information that would help us in knowing you as an individual and in determining your eligibility or need (example: challenges in your life experience, how you are financing your education; previous work experience; reasons for choosing your professional or vocational goals - e.g. the arts, education, plumbing, medical profession, etc.; and long range plans after graduation).
- 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.
- Two (2) letters of recommendation from adults other than family members.
- Copy of the confirmation page of your FAFSA report stating your EFC (Expected Family Contribution). Please note: A complete copy of your Student Aid Report (SAR) may be requested, but is not required upon application submission.
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 blue or black ink.

Name: ____________________________________________
First    Middle    Last

Permanent Address: _____________________________________________________________
Street   City   State Zip

Number of years at this residence: ____  Number of years as a resident of Luzerne County: ____

Date of Birth: ___________  Male__   Female__  Last Four digits of Social Security #: _____

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:   ( ) 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________________

Major Field of study:_______________________________________________________

Name of Applicant: ________________________________________________________
SCHOOL AND COMMUNITY ACTIVITIES:
Please list extracurricular, community and religious activities in which you have participated during the past 4 years. Attach additional sheets as necessary.

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<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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<th>Employer</th>
<th>Nature of Work</th>
<th>Dates of Employment</th>
<th>Hrs/Wk</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 ___________________________
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 _____________

How did you hear about our scholarships?  School ____________  Newspaper ____________
Web Site (give URL) ____________________  Other _________________________

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

Return all documentation 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.