KENNETH L. MALKEMES, JR. MEMORIAL SCHOLARSHIP FUND CRITERIA

Created by Ken’s mother, wife and sons, and sister, The Kenneth L. Malkemes, Jr. Memorial Scholarship Fund is dedicated to preserving Kenny’s love of life, passion for his community, and the rigor of mathematics and the engineering sciences.

The Kenneth L. Malkemes, Jr. Memorial Scholarship is a $1,000 one-year, non-renewable award paid in two segments: $500 in July and $500 in December of the academic year. The donors reserve the right to adjust the dollar amount and number of awards given annually at their sole discretion.

Qualified applicants for this one-time scholarship award must:

• Be a graduating senior from Crestwood High School, Mountain Top, PA
• Planning to attend a four-year college or university as a full-time student
• Planning to Major in Mathematics or any of the Engineering Sciences
• Must maintain a minimum 3.0 out of a 4.0 scale during their academic year
• Must show participation in their community either through work experience, community and/or volunteer activities, involvement in team athletics, or any combination of the above
• Although academic success is most important, the applicant must demonstrate financial need

Application Requirements:

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

- A completed copy of the Malkemes Scholarship Application (clearly printed using dark ink)
- A personal statement (essay) in 2 pages or less, typed. Your statement should include information that would help us in knowing you and in determining your eligibility or need (example: how you are financing your education; previous work experience; reasons for choosing your professional goals - e.g., mathematics, engineering, etc.; challenges in your life experience, long range plans after graduation using your education)
- An official cumulative grade transcript through the most recent term as well as SAT/ACT scores, if available
- A copy of your “Expected Family Contribution” confirmation page from your “Free Application for Federal Student Aid” (FAFSA) report
- Two (2) letters of recommendation from adults other than family members (teachers, coaches, clergy, employers)

~Scholarship deadline is Friday, March 27, 2020~
APPLICANT INFORMATION: This application must accompany the requested information, documentation, and/or letters of recommendation, etc. as stated under the Scholarship Requirements. Please print using dark ink.

Name: ________________________________________________________________________

First    Middle    Last

Permanent Address: _____________________________________________________________

Street   City   State   Zip

Date of Birth: ____________   Male__   Female__   Social Security #: XXX-XX-__________

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 if any: _________________________________________________
THE KENNETH L. MALKEMES, JR. MEMORIAL SCHOLARSHIP

Name of Applicant: __________________________________________________________

(Please PRINT your name.)

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># 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>
<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 __________


THE KENNETH L. MALKEMES, JR. MEMORIAL SCHOLARSHIP

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.