The Thomas P. Kilduff Memorial Fund was established by the family and friends of Tom Kilduff to honor his memory and preserve his legacy. Tom loved sports and loved sportsmanship even more. This scholarship helps defray the cost of books and other school-related expenses benefiting one (1) Dallas High School senior golfer, and also one (1) Wyoming Valley Conference public or private school senior golfer pursuing higher education, who exemplifies Tom’s excellent sportsmanship.

**Eligibility Criteria & Requirements:**

- Students must be senior golfers who are varsity competitors on their team.
- Students must be college-bound and show acceptance into college.
- Students must exhibit excellent sportsmanship.
- Students must submit two letters of recommendation from non-family members (e.g., teachers, coaches, clergy, employers).
- Students must provide an official academic transcript.
- Students must provide a typed essay (500 words maximum). The essay theme should address “why student believes he or she merits Tom Kilduff’s scholarship.”
- Students must submit the Expected Family Contribution (EFC) confirmation page from their FAFSA application. The full FAFSA and family financial information must be provided, if requested from TLF.
- This scholarship is a one-year award and is not renewable.

~Scholarship deadline is Friday, March 27, 2020~
THE THOMAS P. KILDUFF MEMORIAL SCHOLARSHIP FUND
OF THE LUZERNE FOUNDATION
Scholarship Application

APPLICANT INFORMATION: This application must accompany the requested information, documentation, and 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 #:xxx-xx-________

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

E-Mail: ______________________________ Luzerne County resident? ___Yes ___No

High School: ___________________________ Graduation Date:____________________

Home Schooled? ___Yes ___No   If yes, Reviewer Report _________ Cyber School _________

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/separated

Name of spouse: ________________________________________________________________

Address: ______________________________________________________________________
Street   City   State   Zip

COLLEGE/UNIVERSITY INFORMATION:

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: ________________________________________________________________

(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 if necessary.

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<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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<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.

_____________________________________________  ________________________
Name of Applicant: ________________________________________________
(Print 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. By my signature below, I attest to the best of my knowledge and belief, the information provided on this application is true and correct.

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.

The scholarship award will be distributed in two equal payments to the successful scholarship recipient. The initial payment in August for the fall semester and the second payment in December/January for the spring semester. The recipient must maintain a minimum 2.75 GPA in the first term of college or trade school to receive this award for the second term.