

The Jason Ungurian Memorial Scholarship Fund of The Luzerne Foundation

Jason Ungurian worked for 10 years as a Corrections officer at SCI/Mahanoy. A member of the Regional Hostage Negotiations Team and the Honor Guard, he was a friend to all of his fellow Corrections Officers. This scholarship program has been created in his memory to help the children of his “brothers” and “sisters.”

This fund provides an Annual Book Scholarship of \$500 to a student whose parent(s) is currently a member of the Pennsylvania State Corrections Officer Association. This is a one-year scholarship.

Eligibility Criteria:

- Must be either a graduating senior or a current full-time student in a 2 or 4-year college/university or trade school who has a parent who is currently a member of the Pennsylvania State Corrections Officer Association;
- Demonstrated community service and/or work experience;
- A student who has demonstrated strength of character or perhaps exceeded the expectations of their life situation;
- Preference is given to any student or family that has not received this scholarship in the previous three years.

Application Information:

The following must be returned to The Luzerne Foundation by **Monday, April 29, 2024:**

- The completed scholarship application;
- An essay about the importance of family, character and respect. (The essay should be approximately 300-500 words in length, double-spaced). Character is about how one treats and respects others, empathy, volunteerism, willingness to sacrifice for others, etc.;
- An official transcript from your current educational institution;
- A list of your extracurricular and volunteer activities plus any work experience;
- 1 letter of recommendation from a non-family member (e.g., teachers, professors, clergy, employers, etc.);

Please mail completed application packet to:
Scholarship Processing
The Luzerne Foundation
34 South River Street
Wilkes-Barre, PA 18702

You may also submit completed application to Donna@luzfdn.org.
~Deadline is Monday, April 29, 2024~

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

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APPLICANT INFORMATION:

Name: _____
Last First Middle

Address: _____
Street City State Zip

Date of Birth: _____ Male ___ Female ___ Email: _____

Home Phone #: _____ Cell #: _____

Are you a Luzerne County resident? Yes ___ No ___

Name of 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 (if applicable): _____

Address: _____
Street City State Zip

COLLEGE/UNIVERSITY INFORMATION:

College attending or plan to attend: _____

Address (City/State) of college: _____

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

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Name of Applicant: _____
(Please PRINT your name.)

Major Field of Study: _____

SCHOOL AND COMMUNITY ACTIVITIES:

Please list extracurricular, community and/or religious activities in which you have participated during the past 4 years. Attach additional sheet or resume if preferred.

Activity	# of Years	Leadership Positions, Awards & Recognition

WORK EXPERIENCE:

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

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

PSCOA MEMBER INFORMATIONAL PAGE**NAME:** _____**LAST****FIRST****MI****ADDRESS:** _____**STREET ADDRESS (including box or apt. no.)****CITY****ST****ZIP****PHONE:** _____**EMAIL:** _____**EMPLOYER:** _____**WORK PHONE:** _____**COMMONWEALTH OF PA EMPLOYEE NO.:** _____**RELATION TO APPLICANT:** _____**PSCOA LOCAL (Institution):** _____**PSCOA MEMBER SIGNATURE:** _____**DATE:** _____