



**CHARLES DOBBINS FTA SCHOLARSHIP  
\$1000**

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ E-Mail \_\_\_\_\_

FTA Member YES NO

Relationship to an FTA Member \_\_\_\_\_ Name of FTA Member \_\_\_\_\_

High School Name \_\_\_\_\_

High School Address \_\_\_\_\_

Name of School Counselor \_\_\_\_\_

Date of Graduation or Pending Graduation \_\_\_\_\_

School or College you are, or plan to attend \_\_\_\_\_

Major \_\_\_\_\_

Name and Address of Local Newspaper \_\_\_\_\_

Proof of high school graduation and/or documentation indicating you have been accepted or are currently enrolled at an institution of higher education will be necessary. Please attach a short paper telling us about yourself, your career goals, and how this scholarship would help you achieve those goals.

**Due APRIL 15, 2025.**

**Mail to:**

Cory Van Driel  
4781 475<sup>th</sup> Street  
Isle, MN 56342-9246