



SHASTA COUNTY FARM BUREAU

P.O. Box 970
Palo Cedro, CA 96073
(530) 547-7170

2025 VOCATIONAL SCHOLARSHIP INSTRUCTIONS

\$500 scholarships are being offered through the generosity of the Frank & Kathy Muse and the Schmitt families.

Scholarships are available to Shasta County students (current or former) who are pursuing training in diesel mechanics, welding or equipment operations. The applicant must plan on attending college next year, carrying 12 or more units.

This scholarship is available to both high school seniors and current college students, and is not based on financial need. Applicants will be selected based on cumulative results of the application elements listed below.

1. A transcript of the high school work or current year of college.
2. One letter of recommendation must be attached to application. Applicant is limited to one letter of recommendation written by a school employee. Relatives may not be used as references.
3. A completed application form.
4. A photograph must be attached with your application and a digital copy e-mailed to shastacountyfarm1@gmail.com.

To be considered complete, the above items must be included in the application packet.

Applications must be *RECEIVED* at the Farm Bureau no later than March 1, 2025.

Applications received after that date will not be considered. There are no exceptions.

The recipient(s) will be awarded a Certificate at the Shasta County Farm Bureau's 28th Annual Spring Social on March 22 2025, to be held at Mercy Oaks, 100 Mercy Oaks Dr-Redding.

Please return completed application, letters of references, attachments and photo to either:

**Shasta County Farm Bureau
P.O. Box 970
Palo Cedro, CA 96073
(e-mail a digital photo (JPEG Format) to: shastacountyfarm1@gmail.com)**

or

Email entire packet to: ShastaCountyFarm1@gmail.com



Shasta County Farm Bureau

2025 Vocational Scholarship Application

Weld / Equip Op / Diesel Mechanic Students ONLY

NOTE: ALL transcripts and letters of recommendation must accompany this application.

Submission Deadline: March 1, 2025

Application for school year _____ to _____ CFBF Collegiate Membership No.* _____

Name in Full _____ Sex _____
 First Middle Initial Last DOB

Permanent Address _____
 Street No. / Name City State Zip

How long? _____ County _____ Telephone _____ Email Address _____

Mailing Address _____
 (in May and June) Street No. / Name City State Zip

How long will you be there? _____ Cell Phone _____

Father's name _____ Mother's name _____

Father's occupation _____ Mother's occupation _____

How did you find out about this scholarship? _____

List high school, junior college and college(s) attended (including your present school). Do not include single course or class studies (i.e. night school).

School Name	City/State	Major
High School		
Jr. College		
College		
College		

List your work experience during the past four years. Indicate dates of employment, approximate number of hours worked each week, and total amount earned at each job.

Position	From (M/Y)	To (M/Y)	Hrs/Week	Total Amount Earned

List all extracurricular activities (school and community) you participated in during the past four years without pay, i.e. Red Cross, church, work, sports, volunteer work.

Attach additional page, if necessary

Activity	# of Yrs	Special Honors / Awards



Shasta County Farm Bureau

2025 Vocational Scholarship Application

(continued)

What college do you plan to attend? _____

City _____ When? _____ Current GPA _____

Course of study _____

For what occupation are you preparing? _____

My college class standing in the Fall will be: _____

Will you live at home or on campus? _____ Expected date of graduation _____

Will you work while attending college? _____ Have you received a SCFB scholarship in the past? _____
If yes, what year(s) _____

LETTERS OF RECOMMENDATION: Applicant must submit one (1) CURRENT letters of recommendation (refer to instructions for guidelines). Letter shall be dated within the past three (3) months and must be on official letterhead and signed. If mailed, the original must be included. (Scans will be accepted for online submissions.) The persons writing the letter of recommendation (relatives excluded) is:

Name

Occupation

APPLICANT CAREER GOALS: In a paragraph or two please share with the committee your career goals. You may use the space below or attach an additional page.

Signature: _____ Date: _____

* Required