

***The 2025 Clarence & Ruth Rabe Memorial Scholarship***  
***Sponsored by the Fort Recovery Chamber of Commerce***  
(Please complete in black type or print only)

Full Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Name of Parent or Guardian: \_\_\_\_\_

1. Where do you plan to attend school? \_\_\_\_\_

2. Anticipated Major: \_\_\_\_\_

3. Career Objective: \_\_\_\_\_

\_\_\_\_\_

4. High School Activities: (include clubs, organizations, sports, performing arts, academic honors, leadership positions held, etc. – attached additional page if necessary.)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

5. Community Service: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

6. Special Interests & Hobbies: \_\_\_\_\_

\_\_\_\_\_

7. Work Experience: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

8. GPA: \_\_\_\_\_

**Please write a paragraph (200 words or less) telling how your talents, abilities, and degree could benefit the Fort Recovery community and attach it to your application.**

**(Please return this application to the guidance office by, February 3, 2025.)**