

DOUGLAS M. NELSON SCHOLARSHIP AWARD APPLICATION

MAIL TO: Douglas M. Nelson Scholarship Program,
3205 Country Drive, Little Canada, MN 55117.

QUESTIONS? Call: (651) 379-9600
E-mail: draabe@ftium.edu.

ELIGIBILITY Students must meet these criteria to be eligible. Please initial.

1. ___ I confirm that I am currently enrolled or graduated from the FTIUM Apprenticeship Program.
2. ___ I confirm that I am currently employed by a finishing trades employer.
3. ___ I have attached a letter of recommendation.

PERSONAL INFORMATION

*Name: _____
Last Name
First Name
Middle Name

If it is different than your formal name, what do you prefer to be called?: _____

The Douglas M. Nelson Scholarship Program is restricted to residents of the 50 states of the United States of America, the District of Columbia, and Puerto Rico.

*Home Address: _____

*City: _____ *State: _____ *Zip Code: _____

*Primary Telephone: (____) _____ - _____ Secondary Telephone: (____) _____ - _____ Ext. _____

Email address: _____ *Date of Birth (MM/DD/YYYY) ____/____/____

EDUCATION

*What profession or field of employment do you wish to enter with your college degree?

List any other postsecondary institutions you have attended:

Name: _____

City: _____ State: _____ Years: _____

Name: _____

City: _____ State: _____ Years: _____

PERSONAL STATEMENT

Each application must be accompanied by a personal essay/statement, approximately 500 words that reflects your current and future leadership potential and academic ability to complete the Associates degree in Construction Technologies and an introduction of yourself to the committee who will review your application.

CERTIFICATION STATEMENT

By signing my name below, I confirm that all of the information provided above and in the accompanying documents is true and correct to the best of my knowledge.

Signature _____ Date _____

REVISION #3
01/15/2021

IUPAT membership
required
for program
participation