A Swedish American Fraternal Organization DISTRICT LODGE LAKE MICHIGAN NO. 8 Instituted March 31, 1908

#### DISTRICT NO. 8 & SOUTH SIDE CHICAGO LODGES SCHOLARSHIPS APPLICATION

# **MAIL OR EMAIL TO:**

Lynda Smith
District Lodge Youth Supervisor
lamsmith@hotmail.com
1502 Azalea Drive
Munster, IN 46321

# **DUE DATE – March 15, 2025**

Cnecklist: _	Main App	offication (3 pages)	Photo	I ransci	ript(s)	2 Reference Letter
	LL Recommer	nded (Req.)	CC Recon	nmend (Opt.)	Essay	
		APPLIC	ANT PERSON	AL INFORMAT	<u>ION</u>	
PLEASE <u>A</u>	TTACH PH	OTO OF APP	LICANT.			
Application	Date:					
Name:						
Street Addr	ess:					
City/State //	Zip:					
Phone:						
Email Addr	ess:					
Birthplace:			I	Birth Date:		
Name(s) of	Parent(s)/Gu	uardian(s):				
Ancestry:	Danish	Finnish	Icelandic	Norwegian	Swedish	Other
Date Initiate	ed into Vasa	Order:				
Member of	Children's C	Club (Name & 1	No.) – if applic	rable:		
Member of	Local Lodge	(Name & No.)	):			
Lod	ge Recording	g Secretary:				
Lod	ge Street Ad	dress:				
Lod	ge City/State	e/ Zip:				
Lod	ge Phone:					

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# **EDUCATION**

High School Name (if H.S. Senior):

College/University Name:

College/University Address:

College/University City/State/Zip:

Major (and minor, if applicable) course(s) of study:

# TRANSCRIPT OF COURSES AND GRADES

ATTACH A COMPLETE TRANSCRIPT OF GRADES THROUGH THE FIRST SEMESTER OF YOUR CURRENT YEAR IN SCHOOL.

HONORS RECEIVED Please include when received.

# **EXTRA CURRICULAR ACTIVITIES**

Please include period of time involved (e.g. Jan 2023 – Nov 2024).

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# **COMMUNITY AND SERVICE ACTIVITIES**

Please include period of time involved (e.g. Jan 2023 – Nov 2024).

# **PLANS FOR THE FUTURE**

EMPLOYMENT
Please include period of employment (e.g. Jan 2023 – Nov 2024).

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# TWO (2) PERSONAL LETTERS OF REFERENCE

Letters must be received from two references and may be attached to this application and/or mailed directly to Lynda separately. Personal references CANNOT be relatives.

1.	Name:
	Street Address:
	City/State/Zip:
	Email:
	Phone:
2.	Name:
2.	Name: Street Address:
2.	
2.	Street Address:
2.	Street Address: City/State/Zip:

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# **LOCAL LODGE RECOMMENDATION (required)**

Dear Local Lodge Recording Secretary: Your member has applied for a scholarship from the District Lodge. The information requested below is very important in assisting our judges in rating the applicants, and your cooperation is greatly appreciated. Applicant, ,was initiated into the Vasa Order on (date) and is a member in good standing of our lodge. Supporting Statements: (Local Lodge Name and Number) (Signature of Local Lodge Recording Secretary) LL SEAL

(here)

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# **CHILDREN'S CLUB RECOMMENDATION (optional)**

Dear	Children <sup>3</sup>	's	Club	Su	nervisor
Dear	Cilliaicii	J	Club	Su	per visor.

Your member has applied for a scholarship from the District Lodge. The information requested below is very important in assisting our judges in rating the applicants, and your cooperation is greatly appreciated.

Applicant, (Children's Club Name & No) since	,has been a member of (date).	
Supporting statements:		

(Signature of Children's Club Supervisor)

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#### **ESSAY**

# Please write a 500 - 1,000-word essay on ONE of the following subjects\*:

- 1. What unique talents, personal attributes, and/or experiences would you contribute to your local lodge or children's club in the future?
- 2. What is your favorite Scandinavian-related memory and why?
- 3. Knowing that Vasa's goal is to promote Nordic culture, why should the Scholarship Committee award a scholarship to you?
- 4. Describe a personal experience that influenced your decision to pursue a particular field of study

Use a size 12 font or larger, and write your name and the question you are answering at the top of the first page as your title.

### SUPPORTING INFORMATION

In order to assist the scholarship committee in making a proper evaluation, a brief statement may be attached containing any additional information you consider relevant to your scholarship application. You may also attach supporting/additional information related to any of the above fields.

SWORN STATEMENT OF APPLICANT	<u>[</u>
I HEREBY CERTIFY THAT THE INFORMATION PROVIDED IN TH	IS APPLICATION IS
CORRECT TO THE BEST OF MY KNOWLEDGE. I WILL USE ANY .	AWARD GRANTED FOR
NO PURPOSE OTHER THAN NECESSARY EXPENSES CONNECTE	D WITH MY EDUCATION. I
DO () DO NOT () PERMIT PUBLIC ANNOUNCEMENT OF TH	IE AWARD IF SELECTED.
APPLICANT SIGNATURE*:	DATE:
*If emailing, please print, sign, and scan this page.	

Revised: 23 November 2024 LAS

<sup>\*</sup>If you have previously applied for this scholarship, you must write this year's essay about a **different topic** than the topic(s) you've previously chosen.