**VASA ORDER OF AMERICA**

**District Lodge Pacific Southwest NO.15**

**Scholarship Application 2023
 *SWEDISH ISLAND LANGUAGE CAMP***

***Deadline: December 31, 2022***

Important: *PLEASE READ* THE REQUIREMENTS PAGE *BEFORE FILLING OUT THE APPLICATION*

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birth Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Full Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Member of Lodge\*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ No.\*\_\_\_\_\_\_\_\_\_\_\_\_\_\_

VOA Membership Application approved on\*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*For the Sjölunden & Swedish camp awards: If applicant is not yet a member, please give the name of a Parent/Guardian or Grandparent who is a lodge member:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade Point Average (if applicable)\_\_\_\_\_\_\_\_

Education Completed: [ ] High School [ ] Vocational School [ ] College [ ] Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NOTE: *Please refer to the* Requirements *page for* 1. *Submitting information on Lodge Involvement;* 2. *Essay Subjects*

Community Related Activities\*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Work Experience\*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Hobbies/Interests\*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \*You may include a separate page if more space is needed.

Personal Information: [ ] Male [ ] Female [ ] Single [ ] Married

Name of Spouse (if married)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Children\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (names and ages)

Ancestry: [ ] Swedish [ ] Danish [ ] Finnish [ ] Icelandic [ ] Norwegian [ ] Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Supporting Statement: In order to assist the Scholarship Committee in making a proper evaluation, a brief statement may be appended containing any additional information you consider relevant to your application.

STATEMENT: *I hereby certify that the information given on my application is correct to the best of my knowledge.*

Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Applicant’s Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NOTE: Please request the letter from your Lodge Secretary and your references, transcripts, etc., in good time before the application. Send your completed application form and supplementary documents, preferably electronically, **no later than DECEMBER 31, 2022** to:

*Kin Lindgren, DL 15 Scholarship Chair*

*scholarships@vasaDL15.org*

*or: Kin Lindgren, P.O. Box 4823, Laguna Beach, CA 92652*

Questions? *Feel free to email, or call Kin at 949.412.0245 or Jennifer at 206.931.6653*