S/N Kristiania Lodge 1-47
Scholarship Application
Rochester, MN

Part 1 of 6: Applicant Information **Date:** _____

Name: _____
(Last name, First name, Middle name)

Home Address: _____
(Street or PO Box #) (City) (State) (Zip Code)

Telephone:_____ **Email:** _____

High School Attending:_____

Cumulative Grade Point Average:_____**Anticipated Graduation Date:** _____

College, University, Community College or Technical School attending: (Include school name, city, and state) _____

Parent(s) or Legal Guardian(s): _____

If you are related to a current Kristiania Lodge member, please provide the member's name and your relationship to the member: _____

_____

What are your education and career goals:

_____

List a minimum of one personal reference, e.g., teacher, counselor, coach, employer, clergy person, or community member who is not related to you. Attach a letter of recommendation from each personal reference listed:

Reference Name:_____**Email:** _____

Reference Name:_____**Email:** _____

Reference Name:_____**Email:** _____

[redacted] [redacted]

(Applicant Signature) **(Date)**