

## **Instructions and Rules**

### **GLSF Academic Scholarship Application**

**Grieg Lodge Scholarship Fund (“GLSF”) was founded, in part, to “develop the pursuit of the intellect and education in all areas of life by providing scholarship grants, to encourage studies of the cultures of Norway and the United States, and for the advancement of literary, musical, artistic and historical creativity.”**

**GLSF gives a minimum of three Academic scholarships of \$2,000 per year. Typically more are given. For example, in 2019, 10 scholarships were awarded.**

**The academic Scholarship Application consists of:**

- 1. The Information Form;**
- 2. An essay written by the applicant (see instruction page);**
- 3. An official transcript from your present school;**
- 4. Each reference listed on your Information Form must:**
  - complete an official Recommendation Form; AND**
  - provide a letter of recommendation.**

**All application materials must be postmarked no later than Thursday, February 13, 2020.**

**All application materials should be mailed to:**

**Grieg Lodge Scholarship Fund  
Attention: Selection Committee  
111NE 11th Ave.  
Portland, OR 97232-3002**

**No Certified mail can be accepted**

**Application materials may also be sent electronically to: [info@gl scholarshipfund.org](mailto:info@gl scholarshipfund.org) or hand delivered to Norse Hall (address above) by **February 13, 2020****

**Incomplete or late applications will not be included in the selection process.**

**Additional materials such as photographs and resumes will not be considered.**

**There is no age limit for applicants.**

**Eligibility is limited to students whose home address is in Multnomah, Clackamas, Columbia, Washington, and Yamhill Counties in Oregon, or Clark County, Washington.**

**Need not be affiliated with Grieg Lodge. Preference will be given to applicants with a connection to Nordic (Denmark, Finland, Iceland, Norway and Sweden) heritage, culture and/or activities.**

**Preference may be given to new applicants and applications from those who have not previously received a GLSF scholarship.**

**Applicants chosen to receive an Academic Scholarship will be notified by **March 31, 2020.****

**Scholarships will be awarded at a brunch on **Sunday, April 19, 2020.****

**The decision of the Selection Committee, on behalf of the Grieg Lodge Scholarship Fund Board of Directors, is final.**

**Scholarship awards will be made to the designated institution on behalf the applicant after we receive proof of enrollment.**

**If you have any questions, email us at: [info@gl scholarshipfund.org](mailto:info@gl scholarshipfund.org)**

**For more forms and information, please visit our website: [gl scholarshipfund.org](http://gl scholarshipfund.org)**

**Information Form**  
**GLSF Academic Scholarship Application**

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

Address \_\_\_\_\_ Phone # \_\_\_\_\_

City/State/Zip \_\_\_\_\_ Other Contact # \_\_\_\_\_

Email Address \_\_\_\_\_ County \_\_\_\_\_  
(Limited to Multnomah, Clackamas, Columbia, Washington and Yamhill counties in Oregon,  
and Clark County, Washington)

Parent or Guardian \_\_\_\_\_

Address \_\_\_\_\_

Do you have an affiliation with Grieg Lodge #2-15? (not required) \_\_\_\_\_

If yes, what is your affiliation? \_\_\_\_\_

Have you ever received a GLSF scholarship? \_\_\_\_\_ If yes, when? \_\_\_\_\_

Last School Attended \_\_\_\_\_ GPA \_\_\_\_\_

If in High School, expected Graduation Date \_\_\_\_\_

Educational plans (Name/Location of Institution/Intended Major/Field of Study)

**Names and contact information of your two references. One must be a current instructor and the other person someone who knows you well but to whom you are not related. (Use separate sheet single sided for additional information)**

Name \_\_\_\_\_ Phone \_\_\_\_\_

Relationship \_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

Relationship \_\_\_\_\_ Email \_\_\_\_\_

**Please provide each of your references with a Recommendation Form and include a stamped envelope addressed to: Grieg Lodge Scholarship Fund, Attention: Selection Committee, 111 NE 11<sup>th</sup> Ave., Portland, OR 97232.**

**Information Form and Essay must be postmarked NO LATER THAN Thursday, February 13, 2020.**

**If sending electronically or hand delivering must be received by February 13, 2020.**

## **Essay Instructions**

**The essay should be typed, double-spaced and checked for grammar and spelling. In 800 words or less cover the following topics:**

**Part 1. Describe your Nordic (Denmark, Finland, Iceland, Norway and Sweden) background/traditions AND participation in Nordic activities.**

**Part 2. Describe your interests and activities, must include school, community AND personal.**

**Part 3. Describe your goals, include personal AND professional/vocational.**

**Recommendation Form**  
**GLSF Academic Scholarship Application**

Name of Applicant: \_\_\_\_\_

Writer of Recommendation: \_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_

Professional \_\_\_\_\_ Personal \_\_\_\_\_ Length of Acquaintance: \_\_\_\_\_

Please rate the applicant on the following criteria. Place an "X" along each line, rating the applicant from Excellent to Poor. If you do not know about a particular area, place an "X" under Unknown.

	Excellent	Good	Average	Poor	Unknown
<b>Creativity</b>					
<b>Dependability</b>					
<b>Enthusiasm</b>					
<b>Initiative</b>					
<b>Leadership Ability</b>					
<b>Maturity</b>					
<b>Perseverance</b>					
<b>Responsibility</b>					
<b>Scholastic Potential</b>					

**NOTE:** A letter of recommendation is required in addition to this Form.  
Your comments will be held in confidence. **Recommendation materials must be postmarked NO LATER THAN Thursday, February 13, 2020. May be sent electronically to: [info@glsscholarshipfund.org](mailto:info@glsscholarshipfund.org)**

Signature \_\_\_\_\_ Date \_\_\_\_\_

Position \_\_\_\_\_

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

**Applicants should provide references with a stamped envelope addressed to: Grieg Lodge Scholarship Fund, Attention: Selection Committee, 111 NE 11<sup>th</sup> Ave., Portland, OR 97232-3002.**

**Recommendation Form**  
**GLSF Academic Scholarship Application**

Name of Applicant: \_\_\_\_\_

Writer of Recommendation: \_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_

Professional \_\_\_\_\_ Personal \_\_\_\_\_ Length of Acquaintance: \_\_\_\_\_

Please rate the applicant on the following criteria. Place an "X" along each line, rating the applicant from Excellent to Poor. If you do not know about a particular area, place an "X" under Unknown.

	Excellent	Good	Average	Poor	Unknown
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Signature \_\_\_\_\_ Date \_\_\_\_\_

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