

Minnesota Western Fraternal Life Scholarship Fund Application Instructions

- The applicant for a Minnesota WFLA Scholarship Fund grant must be a member in good standing of a Minnesota WFLA Lodge.
- The applicant must be a member of Western Fraternal Life Association for a period of one year prior to making an application for a scholarship grant.
- The applicant must be a High School Senior or older.
- The applicant may attach a photo to the application. Individuals receiving grants are published in the Fraternal Herald. (Note: The photo will not be returned)
- There is no limitation on the number of grants an individual may apply for. An application may be submitted each scholarship grant year as long as the individual is attending a post high school education institution on a full time basis.
- Please type or print clearly.
- Each category of the application will be judged on a five point scale:
 - Financial need
 - Lodge activities/community and school involvement
 - Grade point average
 - Essay and application content
- The applicant for a Minnesota WFLA Scholarship Fund grant must complete the application in full and return it by March 1st of each scholarship year. The application may be returned to their local WFLA Lodge Officer, their District Scholarship Fund Representative or to the Minnesota WFLA Scholarship Fund Secretary, Larry Kotval, 6428 Kings Drive North, Oakdale, MN 55128.
- Applications are available online at the Western Fraternal Life Association website – www.wflains.org Please fill out the Minnesota form.

Each of Minnesota's WFLA districts will award one or more scholarship grants, based on the total membership of the district. Scholarship grant recipients will be announced at the Annual WFLA State Meeting.

The recipient of a Minnesota WFLA Scholarship Fund grant shall, upon satisfactory completion of one semester of academic endeavor in the year for which the grant was issued, submit an official transcript of their grade to the Minnesota WFLA Scholarship Fund. Attn: Anne Leland, Treasurer, 5825 Strawberry Lane, Excelsior, MN 55331. Upon receipt of this information, a check in the full amount of the recipient grant will be issued.

The Minnesota WFLA Scholarship Fund Board of Governors must approve all grants awarded by the Minnesota WFLA Scholarship Fund. Termination of the applicant's membership in WFLA or not being a member in good standing of a Minnesota WFLA Lodge shall automatically terminate the applicant's scholarship grant.

Minnesota Western Fraternal Life Scholarship Fund Application

Full Name (First, Middle, Last) _____

Permanent Address _____

Mailing Address _____

City _____ State _____ Zip _____ County _____

Phone Number (____) _____ Email Address _____

I am a member in good standing of Lodge # _____ City _____

High School Education:

High School Name _____

High School Address _____

Higher Education:

Name of Institution _____

Address of Institution _____

City _____ State _____ Zip _____

Employment _____

Parent(s)/Guardian Name _____

Parent(s)/Guardian Address _____

City _____ State _____ Zip _____ County _____

Phone Number (____) _____ Email Address _____

Hometown Newspaper Name/Address _____

City _____ State _____ Zip _____

I authorize the release of the information relevant to my application for this scholarship grant. I certify that all information given is true and correct to the best of my knowledge. If I am awarded a Minnesota WFLA Scholarship, I will, upon completion of the semester of academic endeavor for which the grant was issued, submit an original transcript of my grades to the Secretary/Treasurer of the Minnesota WFLA Scholarship Fund. Upon receipt of this information, a check in the full amount of my grant shall be issued to me. Termination of an applicant's membership in WFLA or not being a member in good standing of a Minnesota WFLA Lodge, shall automatically call for the immediate termination of the applicant's grant.

Applicant's Signature

Date

Signature of Parent/Guardian
(If applicant is under age 18)

Minnesota Western Fraternal Life Scholarship Fund Application

Name _____

High School Graduation Date _____ G.P.A. _____ on a scale of _____ (i.e. 4.0)

Number of semesters or quarters of Higher Education completed _____

G.P.A. _____ on a scale of _____ (i.e. 4.0)

Number of previous Minnesota WFLA Scholarship Fund Grants received _____

1) Please list your activities in: a) Lodge activities, b) Community involvement and c) extra curricular school activities.

2) Please list any honors, awards and offices you have held.

3) State as concisely as possible your goals and the program you intend to follow to achieve these goals.

4) Please summarize your need for financial assistance to achieve your goal.

5) Please include any other information about yourself that you would like the selection committee to consider in evaluating your application.

6) On a separate page please write a short essay of 200 words or less on either one of the following subjects:

- a. "What fraternalism means to me" or,
- b. "What my heritage means to me"