

**Swedish American Heritage Society of West Michigan  
Clarence and Doris Anderson Memorial Scholarship  
29 Pearl Street NW, Suite 127  
Grand Rapids, MI 49503**

Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

E-mail Adress: \_\_\_\_\_ Phone(s): \_\_\_\_\_

Parents/Guardians: \_\_\_\_\_

Birth Date: \_\_\_\_\_ GPA: \_\_\_\_\_ ACT Score: \_\_\_\_\_

Number of years involved in Lucia: \_\_\_\_\_

Awards earned:

Volunteer/service experiences:

Application Questions (Please answer on a separate page)

1. Describe your educational goals. (150 words or less)
2. How would receiving the Clarence and Doris Anderson Memorial Scholarship help you reach these goals?
3. Describe how being a Lucia participant has impacted you. (300 words or less)

\_\_\_\_\_

**Deadline is November 20**

Send application to address at the top of the application along with a photocopy of your high school transcript and ACT score. You may also email the application to [info@sahswm.org](mailto:info@sahswm.org)

**Clarence and Doris Anderson Scholarship information:**

1. This is a one-time award to a high school senior who is a child or grandchild of a member.
2. All Clarence and Doris Anderson Memorial Scholarships are valid for one year from the date of presentation. Any scholarship not claimed by that date will be void.
3. The scholarship recipient will be selected by a special SAHS/WM Committee.
4. Questions can be directed to Lisa Reiersen, [lisareierson@gmail.com](mailto:lisareierson@gmail.com)