

- For expedited processing, send materials by email to [culturalskills@sofn.com](mailto:culturalskills@sofn.com). Reports and pictures can be sent as attachments.
- This form can now be filled out and submitted digitally. Just sign in to the "Members Login" section of [www.sonsofnorway.com](http://www.sonsofnorway.com) to find a digital copy of this form that you can fill out, save and email with the rest of your report.
- Materials sent by mail may take additional time to process. Mail all materials to:  
Sons of Norway  
Cultural Skills Program  
1455 West Lake St.  
Minneapolis, MN 55408
- ★ Please make copies of materials sent by mail. Original items cannot be returned.

## PIN APPLICATION FORM - STAMP COLLECTING PART 2

### CONTACT INFORMATION:

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

Mailing address: \_\_\_\_\_

City: \_\_\_\_\_ State/Province: \_\_\_\_\_

Zip/Postal Code: \_\_\_\_\_ E-mail address: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_

### LODGE AFFILIATION INFORMATION:

(Required) Membership #: \_\_\_\_\_ District #: \_\_\_\_\_ Lodge #: \_\_\_\_\_

1. Have your lodge cultural director (or other lodge officer) sign here to verify that you collected 100 definitive stamps (Activity 1) and 15 topical stamps (Activity 2).

\_\_\_\_\_  
(Name of Lodge Cultural Skills Admin/Officer) Date

- If you're not a member of a local lodge, just make scans or copies of your collection and include them with this form.

2. Elective activity # \_\_\_\_\_

- If your elective activity requires you to write a short summary, include it below. If you need more space, simply attach your summary as a separate document.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Evaluation Form

Have you received Cultural Skills Program pin awards previously?  Yes  No

If yes, please list: \_\_\_\_\_

\_\_\_\_\_  
Signature (Cultural Skills Applicant)\*\* Date

*\*\*By signing this form and accepting awards you are giving Sons of Norway Headquarters permission to use your photos in future promotional materials.*

### FOR SONS OF NORWAY HEADQUARTERS USE ONLY

\_\_\_\_\_  
(Signature of Fraternal Dept. Cultural Skills Program Coordinator) Date



## UNIT EVALUATION FORM - STAMP COLLECTING PART 2

For each of the four questions below, please check the box that fits your opinion most accurately.

	Agree	Disagree
1 Instructions for this part were easy to follow.	<input type="checkbox"/>	<input type="checkbox"/>
2 Requirements for this part were reasonable.	<input type="checkbox"/>	<input type="checkbox"/>
3 Elective activities provided a lot of choices.	<input type="checkbox"/>	<input type="checkbox"/>
4 Required activities were interesting.	<input type="checkbox"/>	<input type="checkbox"/>

This part has (check all that apply):

- Helped me gain a better appreciation of Norwegian heritage & culture.
- Increased my involvement with other lodge members (such as participation in formal & informal discussions, presentations, formal group activities, etc.).
- Increased the interest of my lodge in the Cultural Skills Program because of my participation through special interest groups, presentations, or cultural fairs.
- Offered me an opportunity to involve or pass on this skill/interest to family members or other interested individuals.
- Helped prepare me to participate in the district and/or International Folk Art Exhibition & Competition.

**FEEDBACK:** To improve the unit, please add comments and suggestions. Your comments are confidential and in no way affect the awarding of your earned pin or bar.

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Scan and email this form to [culturalskills@sofn.com](mailto:culturalskills@sofn.com) (preferred) or send it by mail to:

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Minneapolis, MN 55408

