

Application 2023 Raymond Hellmann Memorial Scholarship

For Award for Use in Academic Year 2023-2024

Refer to Scholarship Announcement for eligibility requirements.

Please Type or Print Legibly

Full Name				
Last		First	Middle	
Northern Nevada Address				
	Street			
	City/Zip			
	Phone / En	nail		
I. Scholastic				
School Presently Attending:				
Anticipated Graduation Date:				
Cumulative Grade Point Average: (transcript must be attached) Scholastic awards or achievements:				
If not currently enrolled in a professional degree program, list anticipated university:				
	Ai	nticipated Enrollmen	nt Date:	

II. Accomplishments & Goals

A. List any community service you have been involved in:

B. List any non-academic awards you have received:

C. List any extra-curricular activities you have been involved in, jobs you have held and/or any special areas of interest:

D. What are your plans for completing your professional architectural education?

E. How do you plan to use your architectural education (i.e., "Why do you want to be an architect?"):

F. Where do you see yourself working after licensing? ______(Area of the country, not firm)

III. Information Pertaining to Principal Wage Earner(s)

	Self	Spouse	Parent(s)	Guardian
Name (if diff	ferent from above)			
Home Addre	SS			
Total number of persons dependent on principal wage earner (including children)				

IV. Estimated Budget

For the academic year 2023-2024, estimate your expenses based on two (2) semesters and a 35-week year. Round figures to the nearest \$100.00.

INCOME		EXPENSES	
Aid from family	\$	Tuition & Fees	\$
Summer Earnings	\$	Books & Materials	\$
Personal Savings	\$	Room & Board	\$
School Term Employment Earnings Assured Scholarships Loans	\$ \$ \$	Misc. Personal & Incidental Expenses (Include expenses for such costs as clothing, Laundry, transportation, and entertainment and Recreation)	\$
TOTAL INCOME	\$	TOTAL EXPENSES	\$
NET DEFICIT FOR	ACADEMIC YEAR 2023 – 2024		\$

Describe any special needs, burdens or expenses:

V. Letters of Support

Provide a minimum of two letters of support from someone familiar with you and your accomplishments.

VI. APPLICANT'S CERTIFICATION

I have read the accompanying Raymond Hellmann Scholarship eligibility requirements and certify that the information contained in my application is complete and correct to the best of my knowledge.

Signature of Applicant

Date

VII. SUBMITTAL CHECKLIST

Signed Scholarship Application	
Scholarship Award Information (Next Page)	
Copy of educational transcript	
Two letters of support	

VIII. SCHOLARSHIP AWARD INFORMATION

Applicant Name:		
College:		
Address for Bursar	s Office	
Bursar's Account N	Jumber	
		(Typically student ID or SSN)
Since award will be t phone number for no		please be sure to include a permanent home address email and
Address:		
Phone:		

Email: