

Student Scholarship

THE PROGRAM

The AIA Shreveport Chapter is providing assistance to architecture students from AIA Shreveport's domain who will pursue an accredited professional degree in Architecture from a Louisiana school of Architecture. The selected candidate will be notified of their award. The Scholarship will be distributed directly to the selected applicant.

ELIGIBILITY

Applicants must be legal residents of the United States and:

- A full-time student that is currently attending a NAAB accredited professional program in architecture in Louisiana.
- A high school graduate from AIA Shreveport's domain.

SUBMISSION REQUIREMENTS

- A completed **Application Form**
- A **Letter of Recommendation** from any of the following: an architect, the dean/director, administration head, or professor at the NAAB accredited professional program.
- A **Personal Essay** outlining your interests, experience, career plans related to architecture limited to 250 words.
- A **High School Transcript** showing final year in high school.

DEADLINES

Submissions are to be typically received by November each year; check with your program's Dean/Director for more details. The winner will be announced following shortly thereafter. Recipients and their immediate family are invited to AIA Shreveport's December Awards Banquet to be recognized by the chapter.

Mail or email submissions to:

AIA Shreveport
PO Box 401
Shreveport, LA 71162

Email: contact@aishreveport.org

Student Scholarship Application

Application Form

First Name: _____ Middle Initial: _____ Last Name: _____
Date of Birth (*mm/dd/yyyy*): _____ / _____ / _____

Current Mailing Address and Contact Information:

Number & Street or PO Box: _____
City: _____ State: _____ Zip Code: _____
Email: _____ Phone: _____
How long have you been a Louisiana resident? _____ years
Please state the name of the high school from which you graduated, (*name of school, city, parish*)

Academic Information

Please state the name of the University and Program that you are currently attending.

Cumulative GPA: _____ Expected Graduation Date: _____
Are you currently fulltime? _____ Will you be fulltime during the coming academic year? _____
What year of school are you currently completing? _____
Faculty References (*List the names of two currently teaching at your Architecture program*)

Applicant's Certification and Release

I hereby certify that the above stated and attached information is true and correct to the best of my knowledge. I authorize AIA Shreveport to request, receive and release information concerning my academic status to and from the Architecture program that I am attending.

Applicant's Signature: _____ Date: _____