



This application must be filled out completely. All information is required for scholarship consideration. Applicant to save form as Last Name_First Name and submit the completed application materials by the school's stated deadline.

Applicant Information

Full Name: Prefix First name Middle name Last name

Informal first name Telephone:

Email-School Alternate/Home Email:

Current Degree program name:

full name of degree program

Undergraduate

Year in current program :

As of this spring semester

Graduate

Will you graduate under your current degree program before the beginning of the Fall semester? _No _Yes

Applicant's School - must be currently enrolled and plan to return to same school in the upcoming fall semester:

Select school from drop down list:

PORTFOLIO

Submitted YES

Scholarship Information

List primary scholarship consideration for the applicant

Primary consideration.

Scholarship Name

Secondary consideration, if any.

Scholarship Name

Schools are to submit application materials from qualified students to:

Texas Architectural Foundation

500 Chicon Street Austin, Texas 78702

foundation@texasarchitects.org texasarchitects.org

tel 512 478 7386 fax 512 478 0528

Texas Architectural Foundation is an affiliated organization of the Texas Society of Architects | AIA

Entered

TAF Architecture Scholarship Application

Applicant's Name

Academic Information

Current GPA/ GPR Cumulative	GPA in Major	Grades as of (month/year):
Total Hours completed towards current degree:	Hours Completed in Major	Current Semester: Hours Enrolled:
Current Design Studio, or last Studio Name		Next Design Studio name

Your Degree Plan Fall 2023

Program Year / Classification in Fall 2023 Semester:	Expected Graduation Mo/Year:
Note specialized studies, certificates, study or work away / study abroad programs (semester/year):	

Degree Prog if Different
for **Spring 2024**
Semester

Architectural Experience Program (AXP)	Have you established an NCARB Record?	Yes	I plan to establish an NCARB Record
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Degrees /or Hours Completed - Include degrees received from current school

School/Major	Degree
Dates Mo/Yr	Mo/Yr
School/Major	Degree/
Dates Mo/Yr	Mo/Yr

Residential Information

U.S. Citizen? Yes No If no, Your Country
of Citizenship

Hometown /Permanent Residence Address

This information is required for our records and, to determine eligibility for some Texas AIA Chapter or State specific scholarships. The AIA Chapters list the Texas Counties that they serve.

Address	City	
State	County	Zip code
High School	City	
State	County (school located)	

Other relevant
hometown / residence
information (optional):

Mailing address if different from above:

Address	City	
State	Zip	County

Applicant's Name

May paste information into this form where applicable.
Reduce type size, format to fit. Do not double space.

Please answer the following.

Financial Assistance

Currently paying non-resident tuition? No Yes

Describe circumstances as they relate to need for financial assistance. Sources of financial support; other financial responsibilities, etc.

Work Experience

Describe your work experience, including experience related to your discipline. Note the names and cities of your employers.

Applicant's Name

Architecture Interests

Please answer BOTH questions:

May paste information into this form that is formatted to fit .

1. What principal area(s) or practice categories within the discipline of architecture in which you are most interested, excel, or desire to develop your proficiency?
2. Please comment on your architecture career plans, short/long-range goals, vision, or any other pertinent information that you would like those evaluating this application to consider. What are you passionate about?

Applicant's Name

Extracurricular/Volunteer Activities/Honors And Awards

Note extracurricular activities on or off campus, volunteer activities, organizations/associations to which you belong (AIAS for example), etc., include any offices held. Also list any honors and or awards and the year awarded.

*Marketing Statement - if you are awarded the scholarship, we would like to use your statement in our TAF marketing campaign. Please tell us how this scholarship will be beneficial to you in the upcoming year.



Please save your completed application form using **Save Form As: your Last name_First name.**

Agreement

Applicant must sign and date this application form below.

Confirmation

I understand that the information requested in this application is to determine the applicant's qualifications, and that it is reserved for confidential use by the Universities and the Texas Architectural Foundation (as may be applicable). Applicant's personal information is not released to the public. Scholarship name and recipient name may be published on our website or in *Texas Architect* magazine. The Foundation may provide limited information to the scholarship donor and may contact recipients. I release it for that purpose.

Certification

I further certify that the information supplied in this application is accurate, and I understand that making inaccurate or false statements could disqualify my application. If a scholarship is awarded to me, I promise to use the grant for the continuation of my architectural education at the University from which I am applying, and to comply with requirements of the grant (reports, etc.)

Completing the Scholarship Application

Of the several scholarships that may be considered with respect to this application, each usually has its own criteria. Some scholarships list either financial need or scholastic standing as the most important consideration. Some may have other or additional criteria, such as hometown of student.

It is important that all questions are answered with some thought and clarity. The Foundation selection committee is comprised of practicing architects — you must convey your qualifications, desire, and passion in written comments. Questions are open-ended so that you may express your unique qualities and circum-stances.

I have read, understand, and complied with the information, instructions and certification contained in and associated with this scholarship application. I further certify to the best of my knowledge, information, and belief that this application is a complete and accurate representation of my financial need, scholastic standing, and other personal information and career objectives.

Applicant's Full Name:

Applicant's Signature insert above or typed:

Date:

*Signature and date is required. A typed name is acceptable as an electronic signature.

DEMOGRAPHICS

The Texas Architectural Foundation offers scholarships that may specify some demographic information as part of the criteria for awarding. We value diversity and the information provided remains confidential. When reported, data will not identify any specific individuals.

Please enter information or check the appropriate box for the following:

Gender: _____

Military Service if applies: Yes Veteran Yes Current Active Duty or Reserves

Ethnicity

Are you Hispanic or Latino? No Yes

A person of Mexican, Puerto Rican, Cuban, Central or South America or other Spanish culture or origin, regardless of race.

Please select the category or categories with which you most closely identify.

___ African American or Black: A person having origins in any of the black racial groups of Africa.

___ American Indian or Alaska Native: A person having origins in any of the original peoples of North and South America (including Central America), and who maintains cultural identification through tribal affiliation or community attachment.

___ Asian: A person having origins in any of the original peoples of the Far East, Southeast Asia or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine islands, Thailand, and Vietnam.

___ Native Hawaiian or Other Pacific Islander: A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific islands.

___ White: A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.