



MICHIGAN  
ARCHITECTURAL  
FOUNDATION

## MICHIGAN ARCHITECTURAL FOUNDATION 2019 SCHOLARSHIP APPLICATION

*AIA MICHIGAN PRESIDENTS' SCHOLARSHIP  
AMERICAN INSTITUTE OF ARCHITECTS SCHOLARSHIP  
KENNETH NEUMANN DESIGN SCHOLARSHIP  
PROFESSIONAL CONCEPTS INSURANCE AGENCY SCHOLARSHIP  
HED ALVIN ERNEST HARLEY GRADUATE SCHOLARSHIP  
JOHN BANICKI SCHOLARSHIP  
DANIEL W. TOSHACH & AIA SAGINAW VALLEY CHAPTER SCHOLARSHIP  
LESLIE D. TINCKNELL SCHOLARSHIP*

**APPLICANT:** *These scholarships are intended for students who are admitted to, or currently pursuing a graduate professional degree in architecture. Students who are residents of the State of Michigan and enrolled and attending the University of Michigan, University of Detroit/Mercy, Lawrence Technological University, Kendall College, or Andrews University are eligible.*

*Your completed application must be received via email no later than April 1, 2019.*

### PERSONAL DATA

Name: \_\_\_\_\_  
Last First Middle

Home Address: \_\_\_\_\_  
Number & Street City State Zip

Telephone \_\_\_\_\_

Email Address \_\_\_\_\_

Current Age \_\_\_\_\_ Social Security Number (last 4 digits only) \_\_\_\_\_

Date of Birth \_\_\_\_\_ Marital Status \_\_\_\_\_

# SCHOLASTIC INFORMATION

Name of University \_\_\_\_\_

Date of Enrollment \_\_\_\_\_

Current year in school \_\_\_\_\_

Anticipated Date of Graduation \_\_\_\_\_

What is your current grade point average? \_\_\_\_\_

# FINANCIAL INFORMATION

This section must be completed by the applicant in consultation with his/her parent(s), legal guardian or spouse. The information will be regarded as confidential and used only for the purpose of evaluation for the Scholarship. Please be as accurate as possible.

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_____ Father's Name	Occupation	Annual Income
_____ Mother's Name	Occupation	Annual Income
_____ Guardian's Name	Occupation	Annual Income
_____ Spouse's Name	Occupation	Annual Income

How many dependents, other than yourself, are your parents supporting? Please provide name and age, and indicate if he/she is enrolled in college by placing and x by his/her name.

Name \_\_\_\_\_ Age \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_

How much will you and/or your family be able to contribute to your education and living expenses for the coming school year? \_\_\_\_\_

Enter your estimated annual college expenses:

- 1. Tuition \$ \_\_\_\_\_
- 2. Room and Board \$ \_\_\_\_\_
- 3. Books & Supplies \$ \_\_\_\_\_
- 4. Fees \$ \_\_\_\_\_
- 5. Transportation \$ \_\_\_\_\_
- 6. Personal \$ \_\_\_\_\_
- TOTAL PER YEAR \$ \_\_\_\_\_

Indicate the amount of support you expect to receive from the following:

- 1. Summer Employment \$ \_\_\_\_\_
- 2. Part-time work (work/study) \$ \_\_\_\_\_
- 3. Loans (specify below, 3-a) \$ \_\_\_\_\_
- 4. Scholarships (specify below, 4-a) \$ \_\_\_\_\_
- 5. Other Sources (specify below, 5-a) \$ \_\_\_\_\_
- 6. Savings \$ \_\_\_\_\_
- TOTAL PER YEAR \$ \_\_\_\_\_

## PERSONAL STATEMENTS

- A. On a separate sheet of paper under the heading PERSONAL STATEMENT, write a brief statement describing your interest, experience, and plans related to architecture.
- B. On a separate sheet of paper under the heading LEADERSHIP STATEMENT, write a brief statement clearly demonstrating your involvement with leadership activities in your community, the local AIAS chapter, or in the design of the built environment.
- C. On a separate sheet of paper under the heading EXTRACURRICULAR ACTIVITIES, describe the activities in which you participated during college. Indicate elected offices held, purpose of organization, community activities, athletics, hobbies and special talents.

## REFERENCE LETTERS

Provide two (2) reference letters from individuals familiar with your scholarship and leadership accomplishments. One of the reference letters must be by a faculty member of your university.

## COLLEGE TRANSCRIPT

Include a copy of your current College transcript.

## EMPLOYMENT HISTORY

List below full-time, summer, or part-time employment and explain your duties and responsibilities (beginning with most recent).

1. From \_\_\_\_\_ to \_\_\_\_\_, 20 \_\_\_\_\_

Employer/type of business \_\_\_\_\_

Position/Duties \_\_\_\_\_ Salary \$ \_\_\_\_\_

2. From \_\_\_\_\_ to \_\_\_\_\_, 20 \_\_\_\_\_

Employer/type of business \_\_\_\_\_

Position/Duties \_\_\_\_\_ Salary \$ \_\_\_\_\_

I agree that the application and all attachments may be used for the purpose of evaluation and selection by the Michigan Architectural Foundation. I also state that all information provided is true and correct to the best of my knowledge.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**THE COMPLETED APPLICATION AND ALL DOCUMENTS MUST BE RECEIVED BY  
April 1, 2019.**

**Please email to Timothy Casai, FAIA at  
[tcasai@tmp-architecture.com](mailto:tcasai@tmp-architecture.com)**