

# College of Architecture and Planning

## 2007-2008 Scholarship Application

Effective August 1, 2006, The Colorado State Legislature passed HB1023, which requires the University to gather additional information for any student who applies for and receives any form of federal, state or local public benefits, including merit, need, or other institutional financial assistance through a state institution of higher education. Any student who has not applied for financial aid by filing the FAFSA must sign an affidavit stating that he/she is lawfully present in the United States and present appropriate identification to the Registrar's Office in order to receive the benefits.

Date: \_\_\_\_\_ Name of Scholarship: \_\_\_\_\_  
(Separate application for each scholarship)

Applicant's name: \_\_\_\_\_

Local address: \_\_\_\_\_  
Street Address Apt/Unit # City State Zip

Local phone #: \_\_\_\_\_ E-mail address: \_\_\_\_\_

Do you currently receive financial aid? Yes \_\_\_ No \_\_\_

If yes, what type of financial aid are you receiving? (Circle all that apply)

Grant(s), Loan(s), Scholarship(s), Fellowship(s), other \_\_\_\_\_

Have you completed a Free Application for Federal Student Aid (FAFSA)? Yes  No

What city or town do you consider to be your home town? \_\_\_\_\_

CURRENT CUMMULATIVE GPA \_\_\_\_\_

What is your professional goal? Architect \_\_\_ Planner \_\_\_ Landscape Architect \_\_\_ Other \_\_\_

List the names and phone numbers of **three** individuals who will be writing recommendation letters for you.

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

**The following shall be included in the application submittal for each Scholarship/Award:**

- Applicant's profile, including academic, community, and work experiences.
- If this Scholarship requires **disadvantaged** status, please explain qualifying situation.
- If this Scholarship requires demonstration of **financial need**, submit a detailed financial need analysis of your anticipated 2007-2008 school budget, including amounts and sources of all definite and probable income and expenses.
- Attach any additional material as required by the scholarship or award you are applying for.

The undersigned applicant acknowledges his/her knowledge of the submittal criteria required for the scholarship or award that is being applied for.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**ALL application materials are due in the receptionist's office of the applicant's respective campus. Incomplete applications will not be considered.**

**UNDERGRADUATE**  
University of Colorado at Boulder  
College of Architecture and Planning  
Campus Box 314  
Boulder, CO 80309-0314

**GRADUATE**  
University of Colorado at Denver and Health Sciences Center  
College of Architecture and Planning  
Campus Box 126  
PO Box 173364  
Denver, CO 80217-3364

**\*\*\*PLEASE CHECK LIST OF SCHOLARSHIPS FOR VARIOUS DUE DATES\*\*\***

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

Estimated budget for the academic year 2007-2008.  
Base Estimate on two (2) semesters and 35-week year.  
Round your figures to the nearest \$50.00.

**INCOME**

**EXPENSES**

Aid From Family \$ \_\_\_\_\_  
Gifts \$ \_\_\_\_\_  
Summer Earnings \$ \_\_\_\_\_  
From Own Savings \$ \_\_\_\_\_  
Assured Scholarships \$ \_\_\_\_\_  
Loans \$ \_\_\_\_\_  
School-Term Employment Earnings \$ \_\_\_\_\_  
\*Other Income or Assets \$ \_\_\_\_\_

Tuition and Fees \$ \_\_\_\_\_  
Books and Materials \$ \_\_\_\_\_  
Room \$ \_\_\_\_\_  
Food \$ \_\_\_\_\_  
Clothing and Laundry \$ \_\_\_\_\_  
Transportation \$ \_\_\_\_\_  
Misc. Personal and Incidental Items \$ \_\_\_\_\_  
Recreation/Entertainment \$ \_\_\_\_\_  
\*Other Expenses (Please specify) \$ \_\_\_\_\_

**TOTAL INCOME** \$ \_\_\_\_\_

**TOTAL EXPENSES** \$ \_\_\_\_\_

**NET DEFICIT FOR ACADEMIC YEAR 2007-2008**

\*Other Income or Assets:

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

\*Other Expenses (Please Specify):

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

List and describe below any financial assets you possess in your own right (e.g., trust funds, stocks, bonds, real estate, other investments, etc.). Give total value of assets:

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

Describe below any special burdens or expenses:

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

\*\*\*STUDENT PLEASE INFORM YOUR REFERENCE OF APPLICATION DUE DATE\*\*\*

## Request for Recommendation

TO: \_\_\_\_\_

APPLICANT'S NAME: \_\_\_\_\_  
Last First Middle

Is applying for the \_\_\_\_\_ Scholarship which is due on \_\_\_\_\_  
\_\_\_\_\_ and has listed you as a reference on his/her scholarship application.

Please fill out the following Summary Evaluation for the above student with the understanding that this is a preliminary recommendation and you may be asked to write a letter in support of the above student at a later date.

### Summary Evaluation

a. Scholarly or creative achievement

0 20 40 60 80 100  
| | | | | | Highest  
\_\_\_\_\_

Percentile

b. Promise or probability of success

0 20 40 60 80 100  
| | | | | | Highest  
\_\_\_\_\_

Percentile

Recommender's Signature \_\_\_\_\_ Date \_\_\_\_\_

Recommender's Name \_\_\_\_\_  
(please print)

*Additional Comments:*

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