



# Northern Nevada

## 2024 Ric Licata Memorial Scholarship Application

For Award for Use in Academic Year 2024-2025

*Refer to Scholarship Announcement for eligibility requirements.*

*Please Type or Print Legibly*

Full Name \_\_\_\_\_  
*Last First Middle*

Northern Nevada Address \_\_\_\_\_  
*Street*

\_\_\_\_\_  
*City/Zip*

\_\_\_\_\_  
*Phone / Email*

### **I. Scholastic**

School Presently Attending: \_\_\_\_\_

Anticipated Graduation Date: \_\_\_\_\_

Cumulative Grade Point Average: \_\_\_\_\_  
*(transcript must be attached, unofficial transcript acceptable)*

Scholastic awards or achievements: \_\_\_\_\_  
\_\_\_\_\_

### **II. Accomplishments & Goals**

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

B. List any non-academic awards you have received:  
\_\_\_\_\_  
\_\_\_\_\_  
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C. List any extra-curricular activities you have been involved in, jobs you have held and/or any special areas of interest:

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

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E. How do you plan to use your architectural education (i.e., “what is your image of the future architect?”):

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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 different from above) \_\_\_\_\_

Home Address \_\_\_\_\_  
 \_\_\_\_\_

Total number of persons dependent on principal wage earner (including children) \_\_\_\_\_

- How do you identify yourself?    \_\_\_Asian or Pacific Islander  
 \_\_\_Black or African American  
 \_\_\_Hispanic or Latino  
 \_\_\_Native American or Alaskan Native  
 \_\_\_White or Caucasian  
 \_\_\_Multiracial or Biracial  
 \_\_\_A race/ethnicity not listed here

**IV. Estimated Budget**

For the academic year 2024-2025, estimate your expenses based on two (2) semesters and a 35-week year. Round figures to the nearest \$100.00.

<b>INCOME</b>		<b>EXPENSES</b>	
Aid from family	\$ _____	Tuition & Fees	\$ _____
Summer Earnings	\$ _____	Books & Materials	\$ _____
Personal Savings	\$ _____	Room & Board	\$ _____
School Term Employment Earnings	\$ _____	Misc. Personal & Incidental Expenses	\$ _____
Assured Scholarships	\$ _____	(Include expenses for such costs as clothing, Laundry, transportation, and entertainment and Recreation)	
Loans	\$ _____		
<b>TOTAL INCOME</b>	<b>\$ _____</b>	<b>TOTAL EXPENSES</b>	<b>\$ _____</b>

**NET DEFICIT FOR ACADEMIC YEAR 2024 – 2025**    **\$ \_\_\_\_\_**

Describe any special needs, burdens or expenses:

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**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 Ric Licata 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 Bursars Office \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Bursar’s Account Number \_\_\_\_\_

(Typically student ID or SSN)

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*Since award will be bestowed **after** school is out, please be sure to include a permanent home address email and phone number for notification:*

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_