



**IBA SCHOLARSHIP  
APPLICATION FORM**

*The IBA Scholarship is available to Bermudian students who are enrolled in a programme leading to an accredited degree in architecture. Candidates must also be current Student Members of the I.B.A. Consult the IBA Scholarship Guidelines for additional information.*

**TO EXECUTIVE COUNCIL**

1. I, the undersigned, hereby apply for the IBA Scholarship.
2. My full name is \_\_\_\_\_.  
*Name of Candidate*
3. I reside at \_\_\_\_\_, \_\_\_\_\_,  
*Address Telephone No.*  
\_\_\_\_\_  
*Email address*
4. I possess Bermudian Status.
5. I have been employed by architects (See Paragraph 12 of this application) for periods aggregating \_\_\_\_\_ years.
6. I am currently enrolled at or have been accepted to attend:  
  
\_\_\_\_\_  
*Name of University Location Degree Programme Years Completed*
7. I do not hold a certificate of registration as an architect nor a license to practice architecture.
8. I understand and will comply with the duties and obligations contained in the I.B.A. Guidelines for the IBA Scholarship.
9. I certify that each and every statement made by me in this application is true and correct.

Dated this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_.

\_\_\_\_\_  
*Candidate's full signature in ink*

**STATISTICS**

10. Date of birth \_\_\_\_\_ . Place of birth \_\_\_\_\_ .

11. I attended high schools, private schools, colleges, universities, as follows:

Name of Institution	Location	No. of Years	Graduation Year	Degree Obtained

12. I list below, in chronological order, the periods of my employment by architects, the names and addresses of my principal employers, and my position while employed by each:

Name of Employer	Location	From (year)	To (year)	Position

**FINANCIAL NEEDS STATEMENT**

<b>EDUCATION COST:</b>	<b>Price in \$BMD</b>
Please list anticipated total cost for the upcoming academic year, including tuition, accommodations, books and supplies and travel expenses.	\$
<b>STATEMENT OF NEED:</b>	
Please use the space below to include a brief statement describing the applicant’s financial need and how educational expenses are currently being funded. Candidates may submit a separate attachment for the statement of financial need, limited to 1-page.	

## VOUCHMENT

I, the undersigned, do hereby certify that I have read the statements herein above made by the candidate and believe them to be correct. I vouch for his/her honorable character and believe he/she is fully qualified to be considered for the IBA Scholarship. I have known the candidate for \_\_\_\_\_ years.

Dated this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_.

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature of Dean or Chairman of School of Architecture  
or Member of Institute of Bermuda Architects

### INSTRUCTIONS FOR COMPLETING APPLICATION FORM

1. Complete and attach I.B.A. Student Membership Application Form together with membership fee where appropriate. Current members renewing membership do not need to fill out the membership application form again. Fill in every blank space, except under the items not applicable to your case, and sign your full name in ink.
2. Have the dean of your school, department chairman or an I.B.A. member sign the vouchment where applicable.
3. Attach proof of Bermudian Status.
4. Attach two letters of reference.
5. Attach transcript of grades for most recent school year completed.
6. Attach current letter of acceptance to architectural programme where applicable.
7. Attach digital design portfolio (or provide link to portfolio) showing recent selected works highlighting strengths in varying media. Portfolios submitted by email attachment must be less than 5MB. Hard copies will not be accepted.
8. Attach a current CV (also known as a resume) highlighting your past work/education experiences.
9. File your application with the Secretary of the Institute.