### NEW HAMPSHIRE LAND SURVEYORS FOUNDATION

# RICHIE LADD MEMORIAL SCHOLARSHIP APPLICATION

Date		Date	
Witness		Applicant	_
will result i	in loss of the scholarship and agreempliance.		-
approves in that, if sele expenses a	I understand that the New Hamps f the scholarship will be for tuition n writing use of the funds for spec ected, I will use the scholarship so approved in writing by the NHLSF n of the same upon request. I unde	n payment unless the NHLSF Boa cific education-related expenses. dely for tuition payment or specif Board of Trustees and agree to p	rd of Trustees I hereby certify ic-related provide
Award:	The amount of this scholarship sha year. Contributions to this scholarsh and The N.H.L.S.F. will be the trust	hip fund will be solely from donation	
Selection:	Selection will be made by the NHLS at the N.H.L.S.A. Summer Quarterl	•	award the scholarship
Deadline:	Applications will be posted on the N submitted by <b>March 31</b> st to: <b>NHLS</b> I	· · · · · · · · · · · · · · · · · · ·	
Priorities:	The first priority for selection is fina to obtain a C+ GPA or better. The a he/she chooses.		-
Intent:	This scholarship is available to a st student in either their 1 <sup>st</sup> , 2 <sup>nd</sup> , 3 <sup>rd</sup> , or		
Purpose:	Land Surveyors Association comm	emorial Scholarship" is in recognition to the continuing education of	•

# Page 2, NHLSF – Richie Ladd Memorial Scholarship Application Continued

Applicant Name			
Address			
City	State	Zip	
Phone	Email		
Parent or Guardian			
(member)			
•			
	State		
County	Telephor	Telephone	
Brothers			
Sisters			
Parents'/Guardians Total (cor	mbined) Income		
	our education Il need is the first priority.)		
High School:			
High School Name			
Address			
Telephone	Teacher/Advisor_		
Curricula	Scholastic Standing	G.P.A	
College: (*	Transcripts Necessary)		
,			
Address			
Telephone	Teacher/Adv	isor	
Curricula			
Semester credits completed t	o date	G.P.A	
Semesters needed to graduat	te not including the current semester		

#### Page 3, NHLSF - Richie Ladd Memorial Scholarship Application Continued

# **Student Activities:** Hobbies Clubs Are you working part-time during the scholastic year? If yes: Employer\_\_\_\_\_\_Position\_\_\_\_ May we contact your employer?\_\_\_\_\_\_Telephone\_\_\_\_\_ Length of service (from)\_\_\_\_\_\_(to)\_\_\_\_\_ Other Previous Education?\_\_\_\_\_If yes: Describe\_\_\_\_\_ References: Name\_\_\_\_\_Telephone\_\_\_\_\_ Address Name\_\_\_\_\_Telephone\_\_\_\_ Address\_\_\_\_ Name of Teacher/Professor\_\_\_\_\_\_Telephone\_\_\_\_\_ Address

## Page 4, NHLSF - Richie Ladd Memorial Scholarship Application Continued

# Essay:

Please tell us about your professional aspirations. What are your goals in college and afterwards. Are there factors which make you particularly deserving of support? (You may use additional sheets as necessary.)