

## APPLICATION - HAAS/KOSHLAND MEMORIAL AWARD

(Please print or type)

Date: \_\_\_\_\_

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

Address: (Home) \_\_\_\_\_

\_\_\_\_\_

(College) \_\_\_\_\_

\_\_\_\_\_

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

Telephone number: \_\_\_\_\_

Year of Study: \_\_\_\_\_

Major (Special interest, if major undeclared): \_\_\_\_\_

\_\_\_\_\_

Please attach: Transcript  
2 letters of recommendation (1 Academic; 1 Personal)  
Written statement of academic achievements and development, goals, and  
interests. (Maximum word count  
500, typewritten.)

Signature: \_\_\_\_\_

Please return application to:

Haas/Koshland Award Committee  
121 Steuart Street  
San Francisco, CA 94105