



## SCHOLARSHIP APPLICATION

Scholarship category:

If applying for a membership scholarship, please indicate type:

Conference/course date:

Registration fee amount:

AFP membership number:

Your name:

Title:

Organization:

Mailing address:

Phone:

Email:

Supervisor's name and title:

Applicant signature and date:

Supervisor's signature and date:

Please note that an incomplete application will not be considered.

Notification will be given within 30 days following particular scholarship category deadline.

On a separate paper, please respond to the following questions. Please refer to yourself in the first person and to your organization as “the organization” in order to maintain the integrity of our blind-review application process.

1. How will attending this educational opportunity enhance your career plans and/or your job performance?
2. How long have you been involved in development work?
3. Describe how you have been involved in the AFP Charlotte chapter. Please include committee and volunteer work.
4. What will your future involvement with AFP Charlotte look like?
5. Does your organization support your educational /professional goals? If so, in what way?
6. If applying for the AFP International Conference/Chamberlain Scholarship, please answer the following: How will receiving the AFP International Conference/Chamberlain Scholarship impact you and your organization?