



**ASSOCIATION OF FUNDRAISING PROFESSIONALS  
LONG ISLAND CHAPTER (AFPLI)**

**Scholarship Application**

**Note: All applications must be legibly printed.**

- I. Type of scholarship for which you are applying  
\_\_\_\_\_ Membership in AFPLI \*  
\_\_\_\_\_ Elena M. Perez Philanthropy Day Scholarship  
\_\_\_\_\_ AFP International Conference  
\_\_\_\_\_ Other (please specify and include copy of seminar brochure or agenda)

Please indicate if you are requesting a full or partial scholarship and the amount:

\_\_\_\_\_ Full \$ \_\_\_\_\_  
\_\_\_\_\_ Partial \$ \_\_\_\_\_

**\* Note: If you are applying for a second-year membership scholarship, you are eligible for a maximum of fifty percent of the membership cost.**

II. Personal Data

Name \_\_\_\_\_ Are you a member of AFP? \_\_\_\_\_

Do you serve on any chapter committees? (please list) \_\_\_\_\_

Have you previously received a scholarship from AFPLI? \_\_\_\_\_  
(if so, include date and what program you attended) \_\_\_\_\_

Job Title \_\_\_\_\_ Employer \_\_\_\_\_

Does your employer have a 501(c) (3) non-profit designation? \_\_\_\_\_

Business Address \_\_\_\_\_

Business Phone \_\_\_\_\_ Business Fax \_\_\_\_\_

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

E Mail Address \_\_\_\_\_

How long have you been responsible for fund raising with your present employer? \_\_\_\_\_ Years \_\_\_\_\_ Months

Supervisor's Signature \_\_\_\_\_ Phone \_\_\_\_\_  
(or signature of an Executive committee member on your organization's board)

III. Background Information

Years in the fund raising profession? \_\_\_\_\_ Years \_\_\_\_\_ Months

Previous training in fund raising (specify courses, seminars, conferences attended)

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Professional Reference \_\_\_\_\_ Phone \_\_\_\_\_

(other than current employer)

IV. Verification

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

V. Attachments (must accompany all applications in order to be considered)

1. Please attach a one-page narrative explaining how this opportunity will be beneficial to you, to your organization and to your career in fund raising. Include an explanation of financial need.
2. Please include one letter of reference.
3. If you are applying for a scholarship to an educational program sponsored by an organization other than the Long Island Chapter of AFP, please attach a copy of the brochure or other descriptive material.