

# AFP Foundation 2018 Chamberlain Scholarship Program

**Deadline for applications: October 15, 2017**

## Personal Data

Applicant's Name \_\_\_\_\_

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

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

Employer \_\_\_\_\_

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

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Business Phone Number \_\_\_\_\_ Home Phone Number \_\_\_\_\_

Email Address \_\_\_\_\_ Website URL \_\_\_\_\_

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

Phone Number \_\_\_\_\_

## Background Information

Years in the Profession \_\_\_\_\_

Previous Training in Fundraising \_\_\_\_\_  
(Please specify courses, seminars, conferences attended)

Professional Reference \_\_\_\_\_  
(Other than present employer)

Phone \_\_\_\_\_ Email \_\_\_\_\_

*I am employed as a full-time fundraising professional or spend at least fifty percent of my time fundraising for my employer.  
I have never attended an NSFRE/AFP International Conference on Fundraising and understand that only one individual from my local organization can be selected.*

\_\_\_\_\_  
(Applicant's Signature)

\_\_\_\_\_  
(Date)

## **Additional Information Required by the Chapter:**

1. Please attach a one-page narrative explaining how this opportunity will be beneficial to you, to your organization and to your career in fundraising. **Include a statement of financial need.**
2. Please include one letter of reference.
3. Only current AFPLI members who have never attended an AFP International Conference on Fundraising may apply.  
\*\*Subject to our chapter guidelines, a member may receive only one scholarship of any kind per calendar year.

Please return completed application & additional information listed above to:

AFPLI Chapter  
110 Schmitt Blvd.  
Farmingdale, NY 11735  
Email: info@afpli.org