



AFP North Carolina Triad Chapter
2017 Chamberlain Scholarship Application

Applicant's Name: _____

AFP Membership #: _____ Years in the Fundraising Profession: _____

This will be my first time attending an AFP International Fundraising Conference: _____

Job Title: _____

Employer: _____

Business Address: _____

Phone: _____ E-mail: _____

Supervisor's Name and Title: _____

Narrative

Please answer the following four questions in no more than 250 words each.

1. Describe how attending the conference will benefit your fundraising position?

2. What would receiving a Chamberlain Scholarship mean to you?

3. How involved are you with the AFP Triad Chapter? (Discuss frequency you attend meetings, committee and volunteer work.)

4. How does your organization support your educational and/or professional goals?

I am employed as a full-time fundraising professional or spend at least 50% of my time fundraising for my employer.

Applicant's Signature: _____ Date: _____

I endorse this applicant's desire to attend the 2017 AFP International Fundraising Conference.

Supervisor's Signature: _____ Date: _____