

## 2019 AFP Foundation Chamberlain Scholarship Program

Deadline for applications: October 15, 2018

## **Personal Data**

Applicant's Name			
Are you a member of AFP?			
Job Title			
Employer			
Business Address			
City	State	Zip	
Business Phone Number	Hon	Home Phone Number	
Email Address	Website	Website URL	
Supervisor's Signature (or signature of an Phone Number	a Executive Committee membe	per of the Greater Dallas Chapter AFP board)	
Cell Number			
<b>Background Information</b>			
Years in the Profession			
Previous Training in Fundraising	(Please specify courses, seminars, o	conferences attended)	
Professional Reference			
Phone	nn present employer) Email		
What I expect to gain from participation	in the AFP International Co	onference that will benefit my organization:	
time fundraising for my employer, and that I	I have never attended an NSF y local organization can be so	e fundraising professional or spend at least fifty percent of FRE/AFP International Conference on Fundraising. I also selected and travel and lodging expense to attend the 2019 part of the scholarship.	
(Applicant's Signature)	<del></del>	(Date)	