



# AFP Alaska Chapter Membership Scholarship Application

Date \_\_\_\_\_

Are you a current member? \_\_\_\_\_

Name \_\_\_\_\_

Title \_\_\_\_\_

Organization \_\_\_\_\_

Email \_\_\_\_\_

Work Address \_\_\_\_\_

City, Zip \_\_\_\_\_

Work Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

How long have you been responsible for fundraising with organization? (# months & years) \_\_\_\_\_

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

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

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

Reference Email \_\_\_\_\_

**I am applying for Young Professional** \_\_\_\_\_

**I am applying for Small Nonprofit** \_\_\_\_\_

In the past 2 years, I have attended:

\_\_\_\_\_ # of AFP Luncheon Trainings

\_\_\_\_\_ # of AFP Chapter Conferences

\_\_\_\_\_ # of AFP International Conferences

\_\_\_\_\_ # of AFP Chapter Socials

\_\_\_\_\_ # of AFP Audio conferences

\_\_\_\_\_ served on chapter committee?

Do you personally represent one of the following dimensions of diversity?

Human Diversity - physical differences inc. gender, age, race, sexual orientation and physical/mental ability \_\_\_\_\_

Cultural Diversity - beliefs, values, and personal characteristics, including ethnicity and religion \_\_\_\_\_

Systems Diversity - organizational structure and management systems, grassroots organizations \_\_\_\_\_

*\*Please share: 1) your reason for wanting to be or continue to be an AFP Member. 2) why financial assistance is needed to be a member, and 3) how you feel this experience will help you professionally. 4) Membership category - Small NPO, Young Professional or Professional*

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***Applications accepted on a rolling basis and reviewed quarterly until filled***

**Please submit completed application to Scholarship Committee via Kelly Hurd at [khurd@citci.org](mailto:khurd@citci.org)**

For Alaska Chapter Use: Date Received _____ Date Committee Reviewed _____
Approved _____ Amount Awarded \$ _____