## 2020 AFP ICON "Chapter Scholar" Scholarship Application

# **AFP - Greater Madison Chapter**

For <u>any (not just first time)</u> attendee at AFP International Conference on Fundraising. To be held Mar 29-31, 2020 in Baltimore, MD. Scholarship covers full conference registration (\$1,499). In addition, Madison Chapter provides a \$750 scholarship toward travel and lodging expenses.

Deadline to apply: December 13, 2019 by 4 p.m.

## PART I – Personal & Employment Information

PERSONAL INFORMATION						
Last Name		First Name				
Job Title/Position		Employer				
Current Business Address			E-mail Address			
City		State	State		Zip	
Business Phone		Cell Phone			Business Website	
How many years	Have you re	Have you received your CFRE Have you		Have you red	eceived a chapter scholarship	
have you been an	_	designation?		in the past?		
AFP member?	Yes			Yes	Date:	
	No No			No No		
FUND DEVELOPMENT INFORMATION						
Are you currently employed in a fund developm Yes No			nent po	sition?	Number of years in the profession:	
If you are NOT employed full-time in a Fund Development position, please outline the nature and						
extent of your responsibilities and activities in Fund Development:						

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List below, in point form, all your volunteer activities with the chapter. Where applicable, list the capacity in which you were involved and time commitment.		
capacity in which you were involved and time communicity.		
PART II— Benefits of Program and Professional Development Activities		
What benefits do you expect to see as a result of your participation in this professional development activity?		
development activity:		
How will the information you gain from this course or event be passed on/shared with		
other people involved in your organization?		
These who wereive scholaushin funding are expected to make a veture to the shorter in some		
Those who receive scholarship funding are expected to make a return to the chapter in some		
manner. Please check your preferred option:		
Write an article for the chapter newsletter.		
Make a brief presentation at a monthly chapter meeting.		
Other:		

### **PART IV- Signature/Endorsement**

### **Applicant Declaration**

### By signing this application, the applicant declares and acknowledges:

- 1. That, to the best of my knowledge and belief, the information and summary of activities as submitted in this application are correct.
- 2. That I, the applicant, meet the eligibility requirements as outlined in the AFP Madison Chapter Scholarship Program guidelines.
- 3. That I will be responsible for providing a written or oral report to the AFP Madison Chapter about the event covered by this application, so that I share the benefit of this experience with other Chapter members.
- 4. That if I receive a scholarship, my name may be printed in the chapter newsletter.
- 5. That I understand the information provided on this application may be used for research and statistical information.
- 6. That if any information is inaccurate, any awards may be reassessed and/or withdrawn.
- 7. That 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 Chapter Conference on Fundraising and understand that only one individual from my local chapter can be selected.

Signature	Date
Supervisor's Signature	Date

Submit this completed application to Courtney Polster, Ph.D.,CFRE <a href="mailto:scholarships@madisonafp.com">scholarships@madisonafp.com</a>

Deadline to apply is Friday, December 13, 2019 by 4:00 p.m.

If you have questions, please contact Courtney Polster, Scholarship Chair, at 608-327-7139.

	For Chapter Use Only
Date Received:	_
Action Taken:	