

Association of Fundraising Professionals –
The Topeka Chapter on Philanthropy
Scholarship Program

Conference Scholarship

Qualifications for scholarship

1. Must be a current member of AFP-TCOP.
2. Must be registered to attend the National AFP Conference or the MidAmerica Conference. Funds will be made payable to the applicant's organization.
3. Application must be signed by applicant's supervisor indicating organization is in support of attendance including registration fees, travel, lodging or meals while attending the conference.
4. Scholarship award will be up to \$500. Funds can be used for expenses associated with the conference.
5. Applicant must give presentation to the local AFP-TCOP group within two months of event.

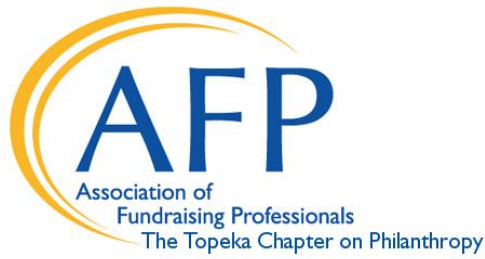
Application will be made to the AFP-TCOP Board and received at least one month prior to the event requested.

New Member Scholarship

Qualifications for scholarship:

1. Must be a first time member of AFP and AFP-TCOP.
2. Successful applicant must serve as an active member of the National Philanthropy Day or Program committee during year of scholarship award.
3. Awardee must attend no fewer than seven of AFP-TCOP meetings and events.
4. Application must be signed by applicant's supervisor indicating the organization is in support of membership and scholarship requirements
5. Scholarship award will provide
 - a. One-year AFP International professional membership
 - b. One-year AFP – TCOP membership
 - c. Tuition for one AFP – TCOP workshop during scholarship year
 - d. One reservation to AFP – TCOP's National Philanthropy Day celebration

One scholarship is available per calendar year. Applications are due by March 31.



Association of Fundraising Professionals –
Topeka Council on Philanthropy

New Member Scholarship Application

Name: _____

Title: _____

Employer: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone #: _____ Email: _____

Number of years in development profession: _____

Number of years in current position: _____

Percentage of time in current position engaged in development work: _____

Previous work/volunteer experience: _____

Please attach a 2-3 paragraph narrative detailing why you want to join AFP-TCOP and what you hope to gain through your membership.

Supervisor Approval

On behalf of _____ (name of employer), I support this scholarship application and its requirements as outlined in AFP-TCOP’s Scholarship Program Guidelines

Applicant’s Supervisor Signature

Date

Print Name

Title

Applicant Signature

If awarded this scholarship, I agree to the requirements as outlined in AFP-TCOP’s Scholarship Program Guidelines

Applicant Signature

Date



Association of Fundraising Professionals –
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Scholarship Program

Application for Conference Scholarship

Applicant Name: _____ Date: _____

Position: _____

Organization: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

AFP Member Number: _____ Expires: _____

How long have you been a member of AFP: _____

How long have you been in your current position: _____

Requesting Funds for:

AFP National Conference

Mid-America Conference

Date of Event: _____

I agree to make a presentation to the AFP-TCOP Chapter upon my return from the conference I am attending.

Applicant's Signature

Date

Our organization is in support of _____ attending the _____
Conference. We will utilize these scholarship funds to offset the cost of this conference.

Applicant's Supervisor

Date: _____

Print Name

Title