



The Triangle Chapter of the Association of Fundraising Professionals (AFP) advances philanthropy by fostering growth and development of fundraising professionals in order to practice effective and ethical fundraising.

The purpose of the AFP Triangle Chapter Scholarship Fund is to promote and enhance the professional development of fund development professionals in the Triangle area and encourage involvement and membership in the Triangle Chapter of the Association of Fundraising Professionals. The chapter is pleased to provide scholarships for educational opportunities, including but not limited to:

- Triangle Chapter Membership Scholarships
- AFP North Carolina Philanthropy Conference
- AFP International Conference
- CFRE Certification assistance

Eligibility:

- To apply for continuing education or certification scholarships, you must be a member of the Triangle chapter of the Association of Fundraising Professionals. If you are not a member, membership scholarships are available. However only one scholarship can be granted to an organization in any one year period.
- You must work for a nonprofit organization based in Wake County and surrounding areas and have at least one year of fundraising experience.
- Applications are accepted on a rolling basis and are considered by the committee at Scholarship Committee meetings.
- Scholarship recipients will be asked to write a follow-up report or make a short report at a chapter meeting. Recipients are also asked to join a working committee of the AFP Triangle Chapter for a one year period.
- An individual member may receive scholarship funds only once during the calendar year. Scholarship applicants must demonstrate professional and personal financial need. Please explain financial need in the application.

Submission:

Please e-mail your completed application to:

Carol Stymiest
AFP Triangle Scholarship Chair
cstymiest@unitedwaytriangle.org



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Scholarship Application

Type (CFRE, Membership, NC Conference, International Conference): _____

Date of Submission: _____ AFP Membership # (if applicable) : _____

Name: _____

Title: _____

Organization: _____

Complete Address: _____

Years in Fundraising Profession: _____ Organization's Operating Budget: _____

Phone: _____ E-mail: _____

Supervisor's Name and Title _____

Please answer the following questions.

1. How will attending this educational opportunity enhance your career plans and/or job performance?
2. What is your organization's purpose/mission?
3. How long have you been involved in development work?
4. How have you been involved with the Triangle Chapter of AFP? Please include committee and volunteer work.
5. Does your organization support your education/professional goals? If so, in what way?

Please SUBMIT A ONE PAGE SUMMARY that demonstrates professional or personal financial need.

Please note the following:

- An incomplete application will not be considered for scholarship awards.
- Notification will be given within 30 days of acceptance or decline.

Applicant Signature: _____

I endorse this applicant's participation in attending AFP monthly meetings and their active role on one AFP committee for a one year period

Supervisor's Signature: _____ **Date:** _____