



Scholarship for Success

- 1) Your Name:
- 2) Organization:
- 3) Mailing Address:
- 4) Phone Number:
- 5) Email Address:
- 7) How will membership in AFP benefit you as a professional fundraiser?
- 6) By submitting this application, you will be expected to uphold the Association of Fundraising Professionals Code of Ethical Principles and Standards of Professional Practice. Do you agree to uphold these standards?
- 7) Tell us briefly why you are a fundraiser or how you were motivated to become one.
- 8) Give a brief description of your responsibilities as a fundraiser within your organization.
- 9) Briefly describe the size, mission, and main activities of your organization. Please provide your organization's web address if applicable so we can learn more about you.

- 10) Please describe your financial need for an AFP new member scholarship.

- 11) What is the operating budget of your organization?

- 12) Does your organization have a line item in the budget for professional development?

- 13) Can your employer match a partial scholarship granted from the AFP Central Texas Chapter?

- 14) Are you paying for your membership out-of-pocket?

- 15) Which type of membership will you be purchasing? (Professional, Young Professional, Small Nonprofit, etc.)

- 16) Do you plan on being a Central Texas fundraiser for the next 2 years or more?