



Membership Renewal Scholarship

- 1.) First & Last Name:
- 2.) Organization:
- 3.) Mailing Address:
- 4.) Phone Number:
- 5.) Email Address:
- 6.) As a member of AFP, how do you demonstrate active participation in the Central Texas Chapter?
- 7.) How have you participated in AFP sponsored/ hosted events or opportunities in the past?
- 8.) If you are approved to receive a Member Renewal Scholarship, you will be asked to serve as a volunteer on a committee. On which committee(s) would you be interested in serving?
- 9.) How long have you been in a fundraising position?
- 10.) Give a brief description of your responsibilities as a fundraiser within your organization.
- 11.) 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.

12.) Member renewal scholarships are awarded as partial scholarships. Would you or your organization be able to pay the remaining amount? Partial scholarships for 25%, 50% & 75% are available. Please indicate which level you are applying for.

13.) Please describe your financial need for an AFP member renewal scholarship.

14.) What is the operating budget for your organization?

15.) Does your organization have a line item in the budget for professional development?

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

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

18.) Which type of membership will you be purchasing? (e.g. Professional, Young Professional, Small Nonprofit, etc.)

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

20.) Have you received a scholarship from AFP before? If so, please indicate which type.