**DIFM DPG Stipend Applicant Information Form**

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| **Name** |  |
| **Credential** |  |
| **Email** |  |
| **Phone Number** |  |
| **Address** |  |
| **# of Years as a DIFM Member** |  |
| **Academy Member Number** |  |
| **Current Employment and Title of Position** |  |
| **Education**School name/internshipArea of StudyDegree/Year graduated |  |
| **Education**School name/internshipArea of StudyDegree/Year graduated |  |
| **Advanced Education**School name/internshipArea of StudyDegree/Year graduated |  |
| **Advanced Education**School name/internshipArea of StudyDegree/Year graduated |  |
| **Professional Affiliations** (Academy, DPG/MIG, other), including leadership positions held |  |
| **Are you interested in joining the DIFM Diversity, Equity, and Inclusion Committee?****\*\*We invite all winners to serve on the DEI committee (minimum one year) for the following year.** |  |