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**2019 Member Scholarship Application**

**Note: To be considered for a scholarship award, members must have attended at least three chapter meetings or events in the previous 12 months or sponsored or hosted a meeting.**

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| **APPLICANT INFORMATION** |
| **First Name** |  | **Last Name** |  | **Member #** |  |
| **Home Address** |  |
| **City** |  | **State** |  | **Zip** |  |
| **Email** |  | **Phone** |  |
| **Employer** |  | **Job Title** |  |

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| **SCHOLARSHIP INFORMATION** |
| **Highest Level of Education** |  |
| **List any Professional Certifications Held** |  |
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| **Have you attended three meetings or events in the past 12 months?** |  |
| **Describe what your scholarship will be used for:** |  |
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| **How much are you requesting?** |  |
| **Provide a summary of why you should be awarded a Chapter scholarship:** |
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