

# THE JOHN GILE MEMORIAL SCHOLARSHIP APPLICATION

Western North Carolina Chapter of the Association of Fundraising Professionals

Philanthropy Institute  
Thursday, July 13, 2023

Please answer the following questions and e-mail the *completed form* along with a copy of *your résumé* to the AFP-WNC Scholarship Committee at [scholarship@afpwnc.org](mailto:scholarship@afpwnc.org) by 5:00 p.m., July 2, 2023.

If you have any questions, please contact [chapteradmin@afpwnc.org](mailto:chapteradmin@afpwnc.org).

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Organization: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

1. Describe your current fundraising and/or nonprofit experience:

a. Are you currently employed in fundraising? ☐ Yes ☐ No

b. What is your current fundraising role? \_\_\_\_\_

\_\_\_\_\_

2. Are you currently a member of AFP? ☐ Yes ☐ No

If yes, for how many years have you been a member? \_\_\_\_\_

3. Have you served as a volunteer for the Chapter? ☐ Yes ☐ No

If yes, in what roles did you serve?

\_\_\_\_\_

4. Have you ever attended Philanthropy Institute? ☐ Yes ☐ No

5. Please add another page to this Word file to answer why are you interested in receiving a scholarship to attend the Philanthropy Institute. What do you hope to learn and how will you share it with others? Briefly describe your financial need. **(300 word limit.)**