

BCNM Scholarship Application Form

Name: _____ Title: _____

Organization: _____

Mailing Address: _____

Phone: _____ Fax: _____

E-mail: _____

Identify Program or Event: _____

1. Do you currently work for or with, serve on the board of, or volunteer with a nonprofit organization?

Yes No

If no, please explain your relationship to the nonprofit sector.

2. What is your organization's operating budget? _____

3. What is your current or anticipated involvement in course-related activities at your organization (depending on the course you are applying for - development, human resources, planning, etc.)?

4. In summary, why should scholarship funds be used to assist you to attend the program? (no more than 50 words please)

Please feel free to send any additional information that will help us understand your organization better.

Signatures:

Applicant

Date

Executive Director

Date