



## SWASFAA Professional Development Scholarship Application

**Application deadline:** Applications should be submitted to the SWASFAA Awards Committee Chair no later than **Friday, October 23, 2009.**

This scholarship was established to assist individuals in their quest for professional growth and development recognizing institutional budgetary constraints. The scholarship may cover up to 100% of unmet costs of registration fees and up to two nights lodging expenses for attending the SWASFAA Annual Conference or other SWASFAA activities/training.

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

Institution: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

\_\_\_\_\_ FAX: \_\_\_\_\_

\_\_\_\_\_

Is your institution's SWASFAA membership current for the year? \_\_\_\_\_ Yes \_\_\_\_\_ No

Please describe your current job responsibilities:

\_\_\_\_\_  
\_\_\_\_\_

How long have you worked in Financial Aid? \_\_\_\_\_

Number of employees in your Financial Aid Office? \_\_\_\_\_

How many SWASFAA conferences have you attended? \_\_\_\_\_

Please attach a type written statement explaining why you would like to attend the conference/training and why you should be given scholarship consideration.

Please provide the contact information of the Director of Financial Aid at your institution: (Director's approval required)

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

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

\*Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

\*In signing this application, you are allowing SWASFAA to publicize information related to a scholarship award.



## SWASFAA Professional Development Scholarship Estimate of Expenses

I would like to be considered for a scholarship to attend the following:

- \_\_\_\_\_ SWASFAA Annual Bootcamp
- \_\_\_\_\_ Mid-Level Workshop
- \_\_\_\_\_ SWASFAA Annual Conference

Below is an estimate of my expenses:

Hotel: \$ \_\_\_\_\_

Registration: \$ \_\_\_\_\_

**Total** \$ \_\_\_\_\_

**Minus** \_\_\_\_\_

**expenses paid by other resources; (i.e., school, state, etc.)**

**Need** \_\_\_\_\_

**Signature of Applicant:** \_\_\_\_\_

**Date:** \_\_\_\_\_

Please submit this application and all supporting documentation prior to the deadline (Oct. 23, 2009) to:

David D. Page  
 SWASFAA Awards Committee Chair  
 Philander Smith College  
 Little Rock, AR 72202  
 FAX to 501-370-5357