



Scholarship Application | AFCC 2023 AFCC Alberta Chapter Conference 2024

AFCC ALBERTA CHAPTER SCHOLARSHIP APPLICATION

Thanks to the support of AFCC members and chapters who contributed to the scholarship fund, scholarships are available for the **AFCC Alberta Chapter Conference 2024 *Thinking Differently: Exploring New Frameworks for Working with Complex Families*** (Banff, Alberta, Canada - In person and Virtual) February 29 - March 1, 2024.

Please fill out the (fillable) application form below and return it by email to afccalberta@gmail.com by **January 5, 2024**. The AFCC Alberta Chapter Scholarship Committee will choose two applicants for consideration.

AFCC Alberta Chapter will notify the chosen applicants by email. The AFCC Alberta Chapter will notify all applicants of the status of their application, in the event they are not selected. If the chosen applicants do not respond promptly, the scholarship will be forfeited and offered to the next applicant.

Scholarships will cover the cost of registration and a certificate of attendance (for both dates).

Preference for scholarships is given to AFCC members. Membership status will be verified upon application. Click [here](#) to join AFCC **and** add the AFCC Alberta Chapter dues.

Due to the number of applications received in past years, those who have received a scholarship in the last five (*updated*) years are not eligible. **Your application may also be considered for future AFCC Alberta Chapter and AFCC scholarship opportunities.**

1. Please provide your contact information. Recipients will be notified via email.

First Name:	<input type="text"/>
Last Name:	<input type="text"/>
Organization:	<input type="text"/>
Address:	<input type="text"/>
Address 2:	<input type="text"/>
City:	<input type="text"/>
Province:	<input type="text"/>
Postal Code:	<input type="text"/>
Date (mm/dd/yy):	<input type="text"/>
Phone:	<input type="text"/>
Email:	<input type="text"/>
Confirm Email:	<input type="text"/>



2. How did you first learn about the AFCC scholarship program?

- | | |
|--|---|
| <input type="radio"/> AFCC website | <input type="radio"/> AFCC Chapter |
| <input type="radio"/> AFCC eNEWS | <input type="radio"/> Friend or colleague |
| <input type="radio"/> Conference program | <input type="radio"/> Listserv |
| <input type="radio"/> Email from AFCC | <input type="radio"/> Web search |
| <input type="radio"/> Another organization | |

Other (please specify)

3. Please select the professional designation that best describes your work. You may choose up to three.

	Primary	Secondary	Tertiary
Academic	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Counselor	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Court Administrator	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Court Services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Custody Evaluator	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Financial Professional	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Guardian ad Litem	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Judicial Officer	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Lawyer	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Mediator	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Nonprofit Legal Services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Parent Educator	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Parenting	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Coordinator/Facilitator	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Psychologist	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Researcher	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Social Worker	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Student	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Therapist	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Other (please specify)



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4. Describe how your participation at this AFCC Conference will impact your community.
(Please limit to 150 words)

5. Are there any additional circumstances the AFCC Scholarship Committee should consider?
(Please limit to 150 words)



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6. Provide a professional reference from your community.

Name:

Organization:

Address 1:

Address 2:

City/Town:

Province:

Postal Code:

Country:

Email:

Phone:

Thank you for your application. Further details and registration instructions will be provided.

If you do not receive an email confirmation within one week of submitting your application, please contact AFCC Admin at afccalberta@gmail.com.