



# The 29<sup>th</sup> Annual National Conference on Social Work in HIV/AIDS

2017 Student Scholarship Application

## Contact Information

<b>Name</b>	
<b>Street Address</b>	
<b>Address 2</b>	
<b>City</b>	
<b>State/Province</b>	
<b>ZIP/Postal Code</b>	
<b>Country</b>	
<b>Daytime Phone (###-###-####)</b>	
<b>Email Address</b>	

## Academic Information

<b>University Name</b>	
<b>City, State/Province</b>	
<b>Country</b>	
<b>Major</b>	
<b>Highest Degree Earned</b>	

## Involvement in HIV/AIDS Social Work

**Briefly describe any experience you have related to HIV/AIDS:**

**Describe why you want to attend the conference and what you hope to gain.**

**Please list any previously attended HIV/AIDS activities, committees, and conferences.**

**Financial Information**

**Please share about your financial need for coming to the conference and other funding sources available to you.**

**By submitting this application for a conference scholarship, you are agreeing to serve as a volunteer during the 2017 conference.**

**Check this box to indicate that you agree to serve as a volunteer.**

Thank you for completing this application form for The 29<sup>th</sup> Annual National Conference on Social Work in HIV/AIDS Scholarship.

Please save the completed PDF file to your computer and email it as an attachment to Lauren Eddie at [Lauren@collaborative-solutions.net](mailto:Lauren@collaborative-solutions.net).