Capital Region Recruiters Network
Membership Scholarship Application

Please complete this application as thoroughly as possible. This application and all information will be held in confidence with the Board of the Capital Region Recruiters Network. The application deadline for the 2011 program year is December 15, 2010.

All questions about this application and process should be emailed to the President at info@crrn.org.

Name:	
Address:	
Phone (indicate work/home/cell):	
Email address:	
CRRN Member Since: (if less than 1 year, indicate month)	
If you are not a CRRN Member, how many mixers have you attended in the past 12 months?	
Employment: (please indicate employed, self-employed, unemployed, student)	
If employed, Name and Address of Employer:	
Current Position Title / Profession:	
Scholarship Amount Requested: (enter $75 for annual membership)	

Reason Seeking Scholarship: describe in detail why funds are needed and what other sources for funds have been sought (if any) and results:

Affirmation: I understand that should the requested scholarship funds for the cost of CRRN's annual membership be approved, I am expected to attend a minimum of three (3) mixers during the program year. In addition, I understand I am expected to volunteer for a committee or event of my choosing within six months of receiving an award.

Applicant Name (Print) _____ Applicant Signature _____ Date _____

Please email completed application to: info@crrn.org or mail to CRRN P.O. Box 38158 Albany, NY 12203

CRRN Board Review & Decision: _____

President Signature _____ Date _____