



Arizona Fire and Burn Educators Association Hugh Anderson Scholarship Fund

Application Guidelines

HISTORY

The Hugh Anderson Scholarship Fund was founded in the memory of Hugh Anderson, Fire Inspector for Bullhead City Fire Department. Hugh was a very vocal and active supporter of Arizona Fire and Burn Educators Association (AFBEA). Each year, Hugh and his wife Barbara donated many hours to the Characterization Conference and any project that supported fire and life safety programs. At his death, Barbara designated AFBEA as a place for donations in his memory. As a result, the Hugh Anderson Scholarship Fund was started. It was AFBEA's intent to honor his commitment and dedication to educational efforts of the fire service by providing a monetary source for other Educators to be able to attend conference and workshops.

QUALIFICATIONS

Any paid member of AFBEA may apply for funds to attend an educational conference or workshop.

APPLICATION PROCESS

Applicants fill out and submit the Hugh Anderson Scholarship Fund Application form to the scholarship fund committee at least **2 months** prior to the scheduled event at the address below. Applicants will be notified by phone, email, or fax if they are awarded the scholarship. A letter, fax or email will be sent to confirm the amount awarded. Applications are available online at www.afbea.org or by mailed at:

Hugh Anderson Scholarship Fund Committee
P O Box 7227
Goodyear, Arizona 85338

APPLICANT'S RESPONSIBILITIES

When awarded the Scholarship, the applicant is required to:

- Make arrangements with AFBEA treasurer for payment of fees and reservations
- Provide receipts as requested
- Give a report of their experience at the next quarterly AFBEA meeting after the conference or workshop attended which will include:
 - Report how the information obtained will be utilized for their department
 - Report to members of any additional information obtained at the conference/workshop



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Name: (Last, First, Middle)		
Address:	Contact Number	Date of Birth
	Work	Social Security #
	Fax	Gender () Male () Female
	Home	Email
Name and Address of Organization		
Enter Conference / Workshop desired and dates: (attach registration information) <div style="display: flex; justify-content: space-between; border-top: 1px solid black; margin-top: 10px;"> _____ _____ </div> <p style="text-align: center; margin-top: 5px;">Dates</p>		
Amount of Assistance Needed: \$ _____	Registration Fee	\$ _____
	Hotel	\$ _____
	Travel/Air Fare	\$ _____
	Total	\$ _____
List other financial assistance: \$ _____	From: _____	
\$ _____	From: _____	
Briefly describe your activities or responsibilities as they relate to the course for which you are applying and identify how you will utilize the information obtained from the course.		
Signature of Applicant		Date:
Supervisor's Signature		Date:
Approved by Scholarship Fund Committee () Yes () No		Date:
Date Check Issued:	Check #	