



Robert L. Stoddard Memorial Endowment
Summer Symposium Scholarship Application

Name _____ Title _____

Institution/Organization _____

Address _____

City _____ State _____ Zip _____ Email _____

Telephone _____ Fax _____

Number of Years: in Resource Development _____ of CRD Membership _____

Previously received a national, regional, or state CRD scholarship?: Yes _____ No _____

If yes, what year and which scholarship? _____

Please write on the back of this form or attach a brief (one page or less) response to the following question:

How will receiving this scholarship benefit you and support your professional goals?

Applicant's Signature _____ Date _____

Applications should be submitted to:

Council for Resource Development
Robert Stoddard Scholarship
One Dupont Circle, NW #365
Washington, DC 20036
crd@crdnet.org
202-822-0750