



*Grant Scholarship  
Application Form  
2023*

Name: \_\_\_\_\_

Fair/Organization: \_\_\_\_\_

None at this time -- *If you are not currently with a fair/organization please explain your situation (i.e. student, job search, etc.):*

\_\_\_\_\_

Preferred Mailing Address: \_\_\_\_\_

City \_\_\_\_\_ State/Prov \_\_\_\_\_ Postal \_\_\_\_\_

Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

Preferred E-Mail Address: \_\_\_\_\_

***INSTRUCTIONS***

1. Always refer to the current year's scholarship rules (separate document).
2. This is a fillable PDF form.
3. On the following pages **do NOT reference your fair's name, your name, your location, etc. The scholarships are judged "blind" – the committee does not know the identity of the applicant.**
4. Email your completed application to [lhart@fairsandexpos.com](mailto:lhart@fairsandexpos.com). It must be received by August 31.

Applicant # \_\_\_\_\_

***For Office Use Only***

**Date Received:** \_\_\_\_/\_\_\_\_/\_\_\_\_ **Prior Winner?** Y **Probable graduation year:** \_\_\_\_\_

**Enrollment Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_ **Org. or Alumni Membership Valid?**

Current position with fair/organization:

- |  |  |
|--|--|
| <input type="checkbox"/> CEO/Manager (paid full time)  | <input type="checkbox"/> CEO/Manager (paid part-time <u>or</u> volunteer)  |
| <input type="checkbox"/> Staff member (paid full time) | <input type="checkbox"/> Staff member (paid part-time <u>or</u> volunteer) |
| <input type="checkbox"/> Board member                  | <input type="checkbox"/> Other _____                                       |

How long have you been in your current position with the fair/organization? \_\_\_\_\_

Annual Fair Attendance:

24,999 and under \_\_\_\_\_

25,000 – 99,999 \_\_\_\_\_

100,000 – 199,999 \_\_\_\_\_

200,000 – 499,999 \_\_\_\_\_

500,000 – 999,999 \_\_\_\_\_

1,000,000 and over \_\_\_\_\_

Total Annual Gross Revenues for Organization: \$ \_\_\_\_\_

Is the fair/organization paying all or some portion of the expenses of your participation in the IAFE Institute of Fair Management?

\_\_\_\_\_ No

\_\_\_\_\_ Yes    If yes:  100% (registration/travel)  Registration only  Travel only  
 Some/Perhaps (limitations) – *please explain below*

***Please limit your response to the space allotted -- do not make attachments.***

What is the primary reason you enrolled in the Institute of Fair Management?

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Applicant # \_\_\_\_\_

***Etix Grant Application -  
Essay Section***

Please limit your response to the space allotted on this page, do not make attachments.

How would receiving the Etix Scholarship be of benefit to you?

Applicant # \_\_\_\_\_