NAHU CAPITOL CONFERENCE 2019 SCHOLARSHIP APPLICATION

NAME: COMPANY: TITLE/ROLE: LOCAL NAHU CHAPTER: PHONE: EMAIL:			
		1.	When did you start in the insurance industry?
		2.	When did you join NAHU?
		3.	What leadership positions (if any) have you held within the association? Local: State: Regional/National:
		4.	What leadership positions (if any) do you have plans or interests in holding in the future? Local: State: Regional/National:
		5.	Have you ever attended NAHU's Capitol Conference before?
6.	On a separate page, briefly explain how your attendance in Capitol Conference will benefit NAHU, your state/local chapter, and/or our industry, and also what you are hoping to gain personally from attending. Include any other info you would like the committee to know or consider in reviewing your application.		
vic Yo	you wish to submit your answers via video submission, please include the link where we can find the deo, do not attach the video file to your submission. You may use any video/file sharing service such as ouTube, Vimeo, DropBox, Google Docs, etc. However, this application must still be submitted with the deo.		
bo bo en	ach scholarship recipient will be expected to volunteer on their state or local board, during the following ard year (2019-2020). By signing below, you agree that your chapter may contact you about open ard positions. Please submit this application, along with any additional info you wish to send, via nail to Crystal Hoffman at crystal@hoffmanig.com . Please include Cap Con Scholarship in the email bject to ensure your email is received appropriately.		
— Ap	oplicant Signature Date		