



# Application for ABC-IL Scholarship Program

Today's  
Date \_\_\_\_\_

Name (Wedding  
Consultant)  
Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Home Phone \_\_\_\_\_

Work/Cell Phone \_\_\_\_\_

Email Address \_\_\_\_\_  
\_\_\_\_\_

## Answer the Following Questions:

1. How long have you been in business? \_\_\_\_\_

2. How long have you been a member of ABC? \_\_\_\_\_

3. Have you taken and completed the 'Weddings As A Business' course?

Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes, when? \_\_\_\_\_

If Not, why? \_\_\_\_\_  
\_\_\_\_\_

4. Have you taken and completed the 'Professional Development Program' ?

Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes, when? \_\_\_\_\_

If Not, why? \_\_\_\_\_  
\_\_\_\_\_