



**The Bob Powell Memorial Scholarship Application  
Due by April 9, 2021**

UPHS Official Use: _____ _____
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Bob Powell, Partner at James Moore & Co., CPAs and long-time nonprofit advocate passed away on July 17, 2018. His commitment to our human services sector was unparalleled including playing instrumental roles in the establishment of many staples we all rely on today: Strategic Nonprofit Alliance Partnership (SNAP), UPHS and INIE. He was such a wealth of knowledge and sought to provide resources/training that addressed the challenges and issues faced by nonprofit organizations and believed by strengthening the nonprofit sector we build stronger communities. While his legacy will remain firm, his gracious and warm spirit will be deeply missed.

In honor of Bob Powell and his legacy, UPHS will award three (3) Bob Powell Memorial Scholarships to selected and eligible participants to attend the UPHS Annual Excellence in Nonprofit Management & Leadership Conference. Each participant will be required to complete an application to include letters of recommendation and the UPHS Education & Training Committee with support from The Powell family will select the recipient annually.

**Selection Criteria Used to Determine the Bob Powell Memorial Scholarship Recipients:**

- Current UPHS Member (Regular, Affiliate and/or Supportive Membership)
- Letter of Recommendation – Letter must be written by applicant’s supervisor, colleague or other professional contact.
- Explanation of financial need.
- Contributions to the applicant’s profession and to his/her community.
- Demonstrated contributions to UPHS.
- Appropriateness of opportunity related to the applicant’s current position.

**APPLICANT INFORMATION**

**Member Organization Legal Name (Agency, Program Or Organization):**

**Member Organization Address:**

**Member Organization Mission:**

**Name & Title Of Applicant:**

**Email:**

**Phone:**

**Number Of Years In Profession:**

**Have You Previously Attended The UPHS Annual Excellence In Nonprofit Management And Leadership Conference? If So, When?**

**SUPPLEMENTAL INFORMATION**

**Please List Relevant Volunteer And/Or Community Service Experience:**

**Please List Any Training Programs And/Or Work Experience Dedicated To Human Service Programs:**

**Please Explain Why You Are Applying For The Bob Powell Memorial Scholarship To Attend The UPHS Annual Excellence In Nonprofit Management And Leadership Conference:**

**Please Identify And Explain Involvement In UPHS (Such As Membership, Attendance At Previous Conferences, Workshop/Training Participant, Etc.):**

**Please Explain How Your Participation In Our Annual Excellence In Nonprofit Management & Leadership Conference Will Benefit You And Why You Should Be Considered For This Scholarship. Also, Briefly Describe Your Career Goals:**

**Name & Title Direct Supervisor:**

## **SUBMISSION INFORMATION**

**All Applicants Must Include At Least One (1) Reference Letter To This Application To Be Written By Your Direct Supervisory, Colleague Or Other Professional Contact.**

**Please send this application, completed in its entirety to United Partners for Human Services:**

2477 Tim Gamble Place  
Suite 200  
Tallahassee, FL 32308-4386 or email to  
[amber@uphsfl.org](mailto:amber@uphsfl.org)

**Thank You for Your Membership!**