



2009 ASIS Foundation Cross Scholarship Application

Please fax this page to 703-706-3706, no earlier than 12:00 am EST on January 1, 2009.

Date: _____
Chapter or region name: _____ Chapter or region #: _____

Applicant:

Name: _____
Name, as it should appear on badge: _____ Member #: _____
Title: _____
Company: _____
Street address: _____
City: _____ State/province: _____
Zip/postal code: _____ Country: _____
Phone: _____ Fax: _____
E-mail: _____

Years in ASIS: _____ Years in security: _____

Please circle the course requested:

- | | |
|------------|---|
| CPP Review | CPP Online Review |
| PCI Review | Curso de Repaso para el Profesional Certificado de Protección |
| PSP Review | PSP Online Review |

I understand this award covers tuition and materials only and that all travel and accommodation expenses will be my responsibility. **(Applicant must check box)**

Chapter or regional officer signature: _____

Chapter or regional officer printed name: _____

Conditions:

1. The application process will be conducted entirely by fax.
2. The first 30 applications received after 12:00 am EST on January 1, 2009 will be considered.
3. Only one application per chapter will be accepted. Applications must be signed by the chapter Chair or endorsed by the Regional Vice President or Senior Regional Vice President when a member is unaffiliated.
4. The recipient must be a member in good standing who has not previously been awarded a Cross CPP, PSP or PCI Review Award.
5. Student members, national officers, ASIS directors, and relatives of the ASIS Foundation Board of Trustees are ineligible for the award.



1625 Prince Street
Alexandria, VA 22314-2818
USA
1-703-519-6200
Fax: 1-703-519-6298
www.asisonline.org