## GUIDELINES for WAMCAT SCHOLARSHIP AWARD

- o Applicant must be an active WAMCAT member.
- o WAMCAT dues must be paid in full for the year in which the scholarship is requested.
- Applicant must have attended at least one (1) WAMCAT workshop within the past year.
- Scholarship funding may be approved only for registration fees and lodging (room) expenses, excluding meals.
  - The Board may approve special scholarship requests involving a personal financial hardship for expenses not reimbursed by a member's municipal employer. Special financial hardship reimbursable areas include: registration fees, and lodging (room) and travel costs excluding meals.
- o A copy of the City/Town current budget containing funds allocated for the applicant's travel and training may be requested.
- o Applications must be received by the Scholarship Chair to be presented to the Board at least thirty days prior to the requested course.
- The scholarship funding program attempts to financially assist as many applicants as possible; therefore, no scholarship will be awarded in excess of \$500.
- Consecutively awarded scholarships may be reduced in order to encourage municipalities to budget for education and conferences for their own employees and to further maximize participation in the Institute programs.
- Consideration will also be given to applicants working toward initial IIMC, APTUS&C or GFOA certifications, and college, continuing education and correspondence courses affiliated with educational advancement of a member's area(s) of job responsibilities for their municipality. This includes eligible on-line training or courses.

APPLICANT AFFIDAVIT				
I have read, understand, and agree to the guidelines for the attached scholarship application. I also understand that in order to receive the funds, I must provide the WAMCAT Scholarship Chair with a certificate or letter confirming my attendance at the program or successful completion of the course for which the scholarship is awarded in addition to proof of eligible expenses incurred.				
Printed Applicant Name	Signature of Applicant	Date		

SUBMIT COMPLETED FORMS TO:

Mandi Fraughton

WAMCAT Scholarship Chair

PO Box 249

Mountain View, WY 82939

mfraughton@mtvwy.com

## WAMCAT SCHOLARSHIP APPLICATION

APPLICANT INFORMATION				
Name:	Title/Position:			
Email:	Length of Service in Position:			
	Phone Number:			
Municipality:	Mailing Address:			
Current and Active WAMCAT Member?  □ Yes □ No	Payment Date of Most Recent Membership Dues:			
Applicant must have attended at least one (1) WAMCAT workshop or annual meeting within the past year. Please list the workshop(s) you have attended that meet this requirement:				
Have you previously applied for scholarship funding?   Yes   No If Yes, when?				
Was prior funding request approved?   Yes   No   If Yes, amount of funding \$				
Have you held, or do you currently hold, a WAMCAT office or served on the Board or on a WAMCAT Committee?   No If so, please list date(s) of service:				
PURPOSE OF FUNDING REQUEST INFORMATION				
□ WAMCAT Institute	Institute Name:Site:Proposed Attendance Dates:			
□ WAM Conference	Training/Education Session: Site: Proposed Attendance Dates:			
□ National Institute of Municipal Clerks (IIMC) Certified Municipal Clerk (CMC) Program	Training/Education Session: Site: Proposed Attendance Dates:			
□ National Association of Public Treasurers of the United States and Canada (APTUS&C) Certified Public Finance Administrator Program	Training/Education Session: Site: Proposed Attendance Dates:			
□ College Course, Continuing Education and Correspondence Course	Training/Education Session: Site: Proposed Attendance Dates:			

Explain your initial certification / education translated (attach additional sheets or information if need		ship funding will assist you		
APPLICANT AFFIDAVIT				
I, the undersigned applicant, agree to the guidelines attached with this scholarship application form. I understand that in order to receive funding, I must provide the WAMCAT Scholarship Chair with a certificate or signed letter confirming my attendance at the program or training session(s), or proof of successful completion of the course for which scholarship funds have been awarded in addition to proof of eligible expenses incurred. I further understand that during the scholarship application review process, a copy of the municipality's current budget, containing any funding amounts allocated for training and travel available to me, may be requested.				
Printed Applicant Name	Signature of Applicant	Date		
SUBMIT COMPLETED FORM AN	ID ANY SUPPORTING DOC	CUMENTATION TO:		

Mandi Fraughton WAMCAT Scholarship Chair PO Box 249 Mountain View, WY 82939 307-782-3100 mfraughton@mtvwy.com

WAMCAT BOARD ACTION						
Recommendation:   Approved	□ Denied	Date:				
Explanation:						
Previous Scholarships Received:						
Scholarship Purpose	Date Received		Amount			
			\$			
			\$			
			\$			