



IIMC FOUNDATION
APPLICATION FOR SCHOLARSHIP ASSISTANCE (CMC)
2019 - 2020

1. Name _____
2. Title _____
3. Date assumed present position ___/___/___ Applicant must be a Municipal Clerk or Deputy Clerk, (or related title), on the date of the application.
4. Population of Municipality _____
5. Municipal Employer _____
6. Mailing Address _____
7. City _____ State/ _____ Zip/ _____
Province Postal Zone
8. Telephone: Home (____) _____ Office (____) _____
E-mail: _____ FAX (____) _____
9. I am a Full or Additional Full member of the International Institute of Municipal Clerks.
 I want to become a member of the International Institute of Municipal Clerks. My application for IIMC membership and check for dues of \$ _____ payable to IIMC are attached.
(Applicant MUST be a member of IIMC at the time of filing for scholarship.)
10. I plan to participate in the Municipal Clerks Institute program at _____
in the State/Province of _____ which is scheduled to convene on ___/___/___.
11. Have you previously attended an IIMC Institute?
 Yes No (Go to 13)

Note: The scheduled Institute date must be between June 1, 2019 and May 31, 2020.

12. If you have previously attended an Institute:
 (a) will you be a second-year participant?
 third-year participant?
 fourth-year participant?
 (b) I have attached the required evidence for each year of prior participation
 (e.g., copy of certificate, letter or receipt verifying that you completed the Institute(s))
 Yes No

13. Have you received funding from the IIMC Foundation in the past?
 Yes how many years? _____ what years? _____
 No

14. Your total annual salary paid by the Municipality for positions you currently hold:
 Full Time \$ _____ Part Time \$ _____

15. What are the approximate costs of the Institute you plan to attend?

Registration Fee/Tuition	\$ _____
Lodging and Meals (if not included in Registration)	\$ _____
Travel Costs	\$ _____
Total	\$ _____

16. On a separate sheet of paper, write an article (300 to 800 words) stating why you need the scholarship and how it will help in your current position. In arriving at an appropriate selection Region Directors will take account of the quality of the submission.

17. Attach written documentation from your mayor, council or manager/city administrator showing that in the event a scholarship is awarded, you will be granted either administrative or annual leave to attend the Institute. Also include a statement indicating the amount the municipality is likely to fund, or explain why the municipality cannot fully fund these costs.

18. I understand that if a scholarship is awarded to me, I must use it between June 1, 2019 and May 31, 2020, and that scholarship funds will be reimbursed after forwarding to IIMC evidence that I have completed the course. I understand my scholarship cannot be transferred to, or used by, anyone other than myself. I do hereby attest that the information submitted in and with this application is true and correct to the best of my knowledge.

Date _____ Signature of Applicant _____

Email this completed Application to Ashley DiBlasi at: Ashley@iimc.com

OR, Mail to
IIMC Foundation
 c/o IIMC Headquarters
 8331 Utica Avenue, Suite 200
 Rancho Cucamonga, CA 91730

To be considered, your Application must be **received by March 1, 2019.**

(Please complete all sections of the Application. Failure to do so may result in disqualification.)