



MID-YEAR ACADEMY SCHOLARSHIP APPLICATION

Deadline is January 20, 2017

Please complete all sections of the application. Attach additional sheets if necessary.

Name: Mr. Ms. _____ Email address: _____

Business address: _____ Business phone: _____

Employer: _____ Title: _____

OAMR designation (*check one – see OAMR Bylaws for qualifications*) Member: ___ Associate Member: ___

If you are an Associate Member, are you currently employed by a legislative body? _____

Are you a current member of IIMC? _____

Are you pursuing certification through IIMC? CMC: _____ MMC: _____ Neither/already have it: _____

List OAMR annual conference attendance dates, if applicable: _____

Have you applied for an OAMR scholarship to attend a Mid-Year Academy before? (If "Yes", indicate years in which funding was received and/or years you applied and did not receive funding.) _____

Have you applied for any other OAMR scholarship funds during the current budget year (November through October)? (If "Yes", indicate which scholarships you have applied for and which you have received, if applicable.) _____

How will you fund the costs not covered by the scholarship (i.e. travel, lodging and food)? _____

Please describe what it means to you to achieve certification or participate in a continuing education program:

I hereby attest the information submitted in this application is true and accurate to the best of my knowledge. I have included a letter of support that also demonstrates financial need, as required within the scholarship guidelines. I understand and agree to complete the requirements of the scholarship award regarding the scholarship report and committee participation.

Signature: _____ Date submitted: _____

DEADLINE: Friday, January 20, 2017, 5 p.m. (postmarks will *not* be considered)

Do not submit the application materials prior to November 7, 2016.

Please submit the completed form and accompanying letter by mail, fax or email to:

Nanci Moyo

OAMR Scholarship Committee Chair

P.O. Box 4755

Beaverton, OR 97076-4755

Fax number (503) 526-2479

nmoyo@beavertonoregon.gov

For additional information, please call (503) 526-2650.