



SCHOLARSHIP APPLICATION

Please complete all sections of the application.

Name: _____

Email: _____

Employer: _____

Job Title: _____

Employer Address: _____

Start date in current job: _____

How long in clerk profession: _____

WMCA Membership Class: Active Affiliate Associate None; Joining now
(check one)

If you are an Associate/Affiliate member, are you employed by a legislative body? Yes No N/A

Are you currently a member of IIMC? Yes No

Which of the following events are you applying for a scholarship to?

_____ WMCA Annual Conference (registration only)

_____ First-time WMCA Annual Conference attendee (registration & lodging at host hotel)

_____ Spring Academy only (registration only) *Note: must have CMC to apply for this event

_____ IIMC Annual Conference Registration (up to \$500)

_____ IIMC Advanced Academy (up to \$500)

_____ Combined Fall Mini-Conference (registration only)

_____ Fall Academy (registration only)

_____ Fall Athenian Dialogue (registration only) *Note: not always offered

_____ Northwest Clerks Institute (NCI) Professional Development 1 (registration & housing on campus)

Note: For PD 2 -4 you may apply for a scholarship for registration OR housing (select one below)

_____ Northwest Clerks Institute (NCI) Professional Development 2 (registration only)

_____ Northwest Clerks Institute (NCI) Professional Development 2 (base housing on campus)

_____ Northwest Clerks Institute (NCI) Professional Development 3 (registration only)

_____ Northwest Clerks Institute (NCI) Professional Development 3 (base housing on campus)

_____ Northwest Clerks Institute (NCI) Professional Development 4 (registration only)

_____ Northwest Clerks Institute (NCI) Professional Development 4 (base housing on campus)



What WMCA Committees are you currently serving on? _____

Do you have your Certified Municipal Clerk (CMC) designation? Yes No

If no, are you pursuing your CMC? Yes No

Have you attended this event before? Yes No

Have you ever received a scholarship from WMCA? Yes No

Have you included a letter of support from your supervisor, as required? Yes No

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 from my supervisor, as required.

I understand and agree that I will need to complete the requirements of the scholarship award including full attendance at the event, completion of a KTAP (if applicable), and future participation on the fundraising committee.

Signature: _____ Date submitted: _____

Please submit the completed application materials by email to:

Kim Agfalvi
City of Orting

kagfalvi@cityoforting.org

For additional information or questions, please call (360) 893-9008

**Late applications will not be considered.
Please see the WMCA scholarship webpage for specific deadline information.**