

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

Name						
Title						
3. Date assumed present position// Applicant must be a Municipal Clerk or Deputy Clerk (or related title), on the date of the application.						
Population of Municipality						
Municipal Employer						
Mailing Address						
City	_State/	Zip/				
	Province		Pos	tal Zone		
Telephone: Home ()		Office (_)			
E-mail:		_ FAX ()			
I am currently a Full or Additional Fu	ıll member	☐ Yes	□ No			
. I am a Certified Municipal Clerk	☐ Yes	□ No Proof	f of CMC sta	tus must be included		
. Your total annual municipal salary	\$	□	full-time	□ part-time		
. Have you previously attended an I	IMC Academy	Program?	☐ Yes	☐ No (Go to 17)		
(a) will you be a □ second-y □ third-year □ fourth-yea (b) I have attached the required	ear participant participant? ar participant? evidence for e	ach year of p				
	Date assumed present position	Date assumed present position//Applic Clerk (or related title), on the date of the application Population of Municipality	Date assumed present position// Applicant must be Clerk (or related title), on the date of the application. Population of Municipality	Clerk (or related title), on the date of the application. Population of Municipality		

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

14. Have you receiv	_		n the past? what years?	_
			ositions you currently he	
16. What are the ap	proximate costs of	the Academy you	plan to attend?	
Registration I Lodging and included in R Travel Costs	Meals (if not	\$\$ \$\$		
17. Date and Location	on (if known at this	time)		
scholarship and ho	ow it will help in yo	our current position	to 800 words) stating on. In arriving at an ap ality of the submissio	opropriate
that in the event a s	cholarship is award Also include a state	ed, you will be grar ment indicating the	il or manager/city adminted either administrative amount the municipalets.	ve or annual leave to
31, 2020 and the	at the scholarship fu t that the informatio	ınds will be sent di	ust be used between Jurectly to me after compwith this application is	letion of the
Date	Signa	ature 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

Please complete all sections of the Application and provide all information requested. Failure to do so may result in disqualification.

To be considered, the Application must be postmarked by March 1, 2019.