



APPLICATION FOR SCHOLARSHIP ASSISTANCE

- 1. Name _____
- 2. Title _____
- 3. Employer _____
- 4. Street Address or P.O. Box _____
- 5. City _____ State _____ Zip _____
- 6. Best Contact Phone () _____
- 7. _____ I am a member of TAMCAR

_____ I want to become a member of TAMCAR. My application for TAMCAR membership and check for dues of \$35 payable to TAMCAR is attached. (Applicant must be a member of TAMCAR at the time of applying for scholarship.)

- 8. Date assumed present position ____/____/____

- 9. Other related municipal experience:

Municipality	Title	Years
_____	_____	_____
_____	_____	_____
_____	_____	_____

- 10. Education (Circle one) H.S. Grad 13 14 15 16 16+

Degrees _____

Other _____

- 11. _____ I plan to participate in the Tennessee Municipal Clerks Institute Program which is scheduled to convene on _____, 20__.

_____ I plan to participate in the Advanced Academy program which is scheduled to convene on _____, 20__.

- 12. Have you previously attended a TAMCAR Institute or Academy program? _____ Yes _____ No

- 13. Have you previously received scholarship funding from TAMCAR or IIMC? _____ Yes _____ No

- 14. Population of Municipality _____

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

Registration fee/tuition \$ _____

Lodging (if not included in registration) \$ _____

Total \$ _____

16. Approximately what portion (%) or amount (\$) of the total costs is your city likely to pay if you received a scholarship? _____ If you do not receive a scholarship? _____

Comments _____

17. Please describe those issues the Scholarship committee should consider in assessing your municipality's financial condition and its ability or inability to fund the costs identified in question 15.

18. Please explain briefly your reasons for wishing to attend the Municipal Clerks Institute or the Advanced Academy.

19. Your application must be accompanied by a letter from your Mayor, Council or Manager supporting your attendance at the program; stating that in the event a scholarship is awarded, you will be given either administrative or annual leave to attend the conference; and verifying the proportion/amount of the costs of attending the program, including lodging, that the municipality is likely to fund, or alternately, the financial inability of the city to fund any of these costs.

Does the document express support for the application? _____ Yes

Does the document grant time off to attend the program? _____ Yes

Does the document indicate the proportion/amount of the total costs and that your municipality cannot fully fund these costs? _____ Yes

20. I understand that if a scholarship is awarded to me, it must be used for the program identified in question 11 and that registration fees will be sent directly to the Tennessee Municipal Clerks Institute or Advanced Academy. _____ Yes

21. I understand that any and all lodging costs are the responsibility of myself or my municipality _____ Yes

22. 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: _____

Return this completed application by May 21, 2021 to:

TAMCAR Scholarship
Valerie Hale, CMC
392 N Main Street
Crossville, TN 38555
Email: Valerie.hale@crossvilletn.gov

*To be considered, the application must be received by the deadline.
(Please complete all sections of the application. Failure to do so may result in disqualification.)*