



# PCCFOA

Pierce County Clerks' & Finance Officers' Association

## SCHOLARSHIP APPLICATION

<b>First Name:</b>		<b>Last Name:</b>			
<b>Address:</b>			<b>Organization:</b>		
<b>City:</b>		<b>State:</b>		<b>Zip:</b>	
<b>Phone:</b>			<b>Email:</b>		
<b>Job Title:</b>			<b>Since:</b>	/	/

**Memberships:** Please check all that apply:

WMCA Member ☐ KCMCA Member ☐ WAPRO Member ☐ IIMC Member ☐  
WFOA Member ☐ PCCFOA Member ☐ NAGARA Member ☐ PSFOA Member ☐  
Other Memberships: \_\_\_\_\_

**Designations:** Please check all that apply: PFO ☐ CPRO ☐ CMC ☐ MMC ☐ EPP ☐

### TRAINING YOU ARE REQUESTING A SCHOLARSHIP FOR:

Is this your first time attending the Training you are requesting a scholarship for? ☐ Yes ☐ No  
Have you previously been awarded a scholarship from PCCFOA? ☐ Yes ☐ No  
If yes, what year(s) & what amount(s) if known? \_\_\_\_\_

**Training course are you using for this scholarship application for** ↓

<b>Training Course Title:</b>	
<b>Date(s) of Training:</b>	
<b>Total Cost:</b>	
<b>Other Funding Awarded:</b>	

\*In what ways have you engaged with PCCFOA throughout the last 12 months? (Attach additional paper if necessary.)

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**Date of last PCCFOA meeting attended:** \_\_\_\_\_

Do you meet the PCCFOA scholarship requirements (see 2nd page): ☐ Yes ☐ No

Do you have all documents asked for under instructions (see 2nd page): ☐ Yes ☐ No

*I so affirm that, to the best of my knowledge, the information above is true and accurate, and that I have also read the requirements, guidelines, and directions on page two.*

<b>Signature</b>		<b>Date</b>	
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# **SCHOLARSHIP REQUIREMENTS, GUIDELINES AND INSTRUCTIONS:**

## **APPLICANT REQUIREMENTS:**

- ❖ All applicants must be a PCCFOA member in **good standing** for the past 12 months.
- ❖ Applicants must have requested their government agency to cover costs and been denied all or part of such funding.
- ❖ Scholarship recipients are expected to attend all sessions, complete a Knowledge Transfer Action Plan (KTAP) if applicable, and ***participate on the Education committee for the following year***. Non-attendance or non-participation will result in ineligibility for future PCCFOA scholarships for the following three years.
- ❖ Starting 2025, applicant must have attended 1 of the 4 quarterly PCCFOA meetings to qualify.

### **General Guidelines:**

- All requests for scholarships must be for the purpose of further developing the applicant's abilities to perform in their position.
- Scholarships may be awarded for tuition/registration and room and board for a qualifying training and are limited to one per applicant per year based on funding date.
- Applications will be considered by need and commitment to attend, with preference given to applicants who have not previously received a scholarship from PCCFOA, and applicants who demonstrate active participation in PCCFOA (meeting attendance, committee involvement, etc.) **Scholarships shall be awarded within the limitation of available funds.**
- Scholarships are non-transferable, and recipients who are unable to utilize scholarship funds must notify the Scholarship Committee Chair immediately. Any cancellation fees shall be the responsibility of the recipient.
- **Scholarships will be by reimbursement only.** Attendees must register and pay for all applicable registration and/or lodging costs up front.

## **INSTRUCTIONS:**

- Must attach copy of registration for class (including costs) and description of training.
- Applicant must submit a letter from their immediate supervisor that:
  - Expresses support for the application; and
  - Expresses financial support needed, if applicable; and
  - Indicates a commitment to grant time to attend the training in its entirety.
- **APPLICATION AND ATTACHMENTS MUST BE RECEIVED NO LATER THAN**
  - a minimum of **three weeks** prior to the conference/training date.

**\*\*\* EMAIL COMPLETED APPLICATION/SUPPORTING DOCUMENTS TO: [Besawk@bonneylake.gov](mailto:Besawk@bonneylake.gov)**

## **AFTER COURSE COMPLETION:**

**Reimbursement Procedure:** After you complete the training, please submit to the treasurer:

- Proof of attendance (e.g. certificate, etc.)
- Copy of the payment document(s) for the cost item(s) approved such as check/voucher stub, bank card statement, hotel invoice, etc.

**NOTE:** PCCFOA prefers to reimburse the member's agency.

**MAIL OR EMAIL TO:** Treva Zumek, PCCFOA Treasurer -  
City of Buckley - PO Box 1960 - Buckley, WA 98321 - [tzumek@cityofbuckley.com](mailto:tzumek@cityofbuckley.com)