



# MASTER MUNICIPAL CLERK ACADEMY (MMCA) APPLICATION FOR SCHOLARSHIP 2016 - 2017

1. Name \_\_\_\_\_
2. Title \_\_\_\_\_
3. Date assumed present position \_\_\_/\_\_\_/\_\_\_ Applicant must be a Municipal Clerk or Deputy Clerk (or related title), on the date of the application.
4. Population of Municipality \_\_\_\_\_
5. Municipal Employer \_\_\_\_\_
6. Mailing Address \_\_\_\_\_
7. City \_\_\_\_\_ State/ \_\_\_\_\_ Zip/ \_\_\_\_\_  
Province Postal Zone
8. Telephone: Home (\_\_\_\_) \_\_\_\_\_ Office (\_\_\_\_) \_\_\_\_\_  
E-mail: \_\_\_\_\_ FAX (\_\_\_\_) \_\_\_\_\_
9. I am currently a Full or Additional Full member  Yes  No
10. I am a Certified Municipal Clerk  Yes  No Proof of CMC status must be included
11. Your total annual municipal salary \$ \_\_\_\_\_  full-time  part-time
12. Have you previously attended an IIMC Academy Program?  Yes  No (Go to 17)
13. If you have previously attended an Academy:  
(a) will you be a  second-year participant?  
 third-year participant?  
 fourth-year participant?  
(b) I have attached the required evidence for each year of prior participation  
(e.g., copy of certificate, letter or receipt verifying that you completed the Academy(ies))  
 Yes  No

**Note: The scheduled Academy date must be between June 1, 2016 and May 31, 2017**

14. Have you received funding from MCEF in the past?  
 Yes      how many years? \_\_\_\_\_ what years? \_\_\_\_\_  
 No

15. Your total annual salary paid by the Municipality for positions you currently hold:  
 Full Time \$ \_\_\_\_\_       Part Time \$ \_\_\_\_\_

16. What are the approximate costs of the Academy you plan to attend?

Registration Fee/Tuition	\$ _____
Lodging and Meals (if not included in Registration)	\$ _____
Travel Costs	\$ _____
Total	\$ _____

17. Date and Location (if known at this time) \_\_\_\_\_

**18. On a separate sheet of paper, write an article (300 to 800 words) stating why you need the scholarship and how it will help in your current position. In arriving at an appropriate selection Region Directors will take account of the quality of the submission.**

19. Attach written documentation from your mayor, council or manager/city administrator showing that in the event a scholarship is awarded, you will be granted either administrative or annual leave to attend the Institute. Also include a statement indicating the amount the municipality is likely to fund, or explain why the municipality cannot fully fund these costs.

20. I understand that if I receive a scholarship award, it must be used between June 1, 2016 and May 31, 2017 and that the scholarship funds will be sent directly to me after completion of the program. I attest that the information submitted in and with this application is true and correct to the best of my knowledge.

Date \_\_\_\_\_ Signature of Applicant \_\_\_\_\_

**Email this completed Application to Ashley DiBlasi at: Ashley@iimc.com**

OR Mail to  
**Master Municipal Clerk Academy (MMCA)**  
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, 2016.**