



**FLORIDA ASSOCIATION OF CITY CLERKS
FACC Dale Barstow Annual Scholarship Application**

CRITERIA:

- **Applicant must be a full time appointed or elected municipal clerk, deputy clerk, clerk of council, or person in a position performing the duties commensurate to duties performed by a municipal clerk in any city in the State of Florida and have a minimum of one-year service completed prior to January 31.**
- The scholarship is awarded by reimbursing the expenses after taking an FACC/IIMC webinar or FACC Athenian Dialogue. A letter outlining that the municipality understands this, must be attached to the application.
- Applicant must be a member and in good standing of the IIMC and the FACC.
- Any awarded funds are to be used solely for the purpose of expenses incurred for an online FACC/IIMC webinar or attendance at an FACC Athenian Dialogue. Up to five individuals will be awarded this scholarship each year. The total scholarship shall not exceed \$100.00 per individual.
- Scholarship is for one use up to \$100.00 per individual.
- Applicant must be actively pursuing the CMC or MMC designation. CMC's and MMC's are encouraged to apply.
- Scholarships may be awarded up to three years maximum per applicant, if the budget allows and other applications are not received or are of a limited number.
- Scholarships are only good for the year in which they were awarded and are non-transferable.
- Submit your application by January 31 to the FACC Administrative Office facc@flcities.com.
- Applications are reviewed by the Awards/Scholarships Committee and a recommendation is given at the February Board Meeting for approval. All applicants will be notified in writing of award and non-award by the Awards/Scholarship Chair.
- Within 30 days after applicant takes an FACC/IIMC online webinar or attends an FACC Athenian Dialogue, they are to submit copies of their receipts to the FACC Executive Director's Office (via email preferred).
- Depending on the cost of the webinar, a check, for the appropriate amount, will be mailed to your municipality not to exceed \$100 per individual scholarship.

Current FACC President, or incoming FACC President, is ineligible to receive any FACC Scholarship during their term of office.

Members, including the Chair of the Awards/Scholarship Committee, are ineligible to be a recipient of any scholarships during their tenure on the Committee.



**FLORIDA ASSOCIATION OF CITY CLERKS
FACC Dale Barstow Annual Scholarship Application**

I, _____, confirm that I am a city clerk or deputy clerk, either appointed or elected, or a person in a position performing the duties commensurate to duties performed by a municipal clerk in any city in the State of Florida, and do hereby make application for scholarship funds from the Florida Association of City Clerks.

Name: _____

Home Address: _____

City/State/Zip: _____ County: _____

Home Phone: _____ Cell Phone: _____

Job Title: _____

Municipality: _____

Municipality Address: _____

City/State/Zip: _____ County: _____

Work Phone: _____ Fax: _____

Email: _____

Date Assumed Present Position: _____

Additional or Related Municipal Experience: _____ YES or _____ NO

If you marked YES, enter the following information.

Name of Municipality: _____

Job Title: _____

Years: _____

Name of Municipality: _____

Job Title: _____

Years: _____



**FLORIDA ASSOCIATION OF CITY CLERKS
FACC Dale Barstow Annual Scholarship Application**

Name of Municipality: _____

Job Title: _____

Years: _____

Member of FACC for how many years? _____

Which FACC district are you in? _____

Are you currently serving as the CHAIR of an FACC Committee? ____ YES or ____ NO

If yes, which committee(s)?

Are you currently serving as a MEMBER of an FACC Committee? ____ YES or ____ NO

If yes, which committee(s)?

How many years have you been a member of IIMC? _____

Are you currently serving as the CHAIR of an IIMC Committee? ____ YES or ____ NO

If yes, which committee(s)?

Are you currently serving as a MEMBER of an IIMC Committee? ____ YES or ____ NO

If yes, which committee(s)?



FLORIDA ASSOCIATION OF CITY CLERKS
FACC Dale Barstow Annual Scholarship Application

Have you attended or completed any of the following:

Summer Conference and Academies within the last 3 years? ____ YES or ____ NO

Fall Academies within the last 3 years? ____ YES or ____ NO

Completed CMC: 1st Year ____ 2nd Year ____ 3rd Year ____ Graduated ____

IIMC Annual Conference or Region Meetings within the last 5 years? ____ YES or ____ NO

If yes to any of the above, did you pay your own expenses? ____ YES or ____ NO

Have you ever been awarded a scholarship by FACC? ____ YES or ____ NO

If yes, when? _____

If yes, type? _____

If yes, amount? _____

Have you obtained a CMC? ____ YES or ____ NO

If yes, what date did you obtain a CMC? _____

Have you obtained an MMC? ____ YES or ____ NO

If yes, what date did you obtain an MMC? _____

For the below questions, please feel free to attach a separate sheet.

Has your municipality budgeted for you to attend other education, conferences, meetings, travel, etc. during the current budget year? ____ YES or ____ NO

If yes, list the name of the class/conference and funds for each:



**FLORIDA ASSOCIATION OF CITY CLERKS
FACC Dale Barstow Annual Scholarship Application**

The following information MUST be attached with your application:

- Complete Job Description. If you do not have one, submit either a copy of the charter section or a letter explaining there is no job description and outline basic duties of the clerk/deputy clerk.
- Evidence from the mayor, manager/administrator, council/commission, that in the event a scholarship is awarded to you, your municipal or governing body has given permission or time off to attend the FACC/IIMC webinar or FACC Athenian Dialogue.
- Letter from mayor or manager/administrator that the municipality or governing body understands they are to underwrite all of the expenses to attend the FACC/IIMC webinar or FACC Athenian Dialogue. Once you attend, a reimbursement request will be made to the FACC up to the maximum awarded. Or, if you are personally underwriting all expenses, then the reimbursement request will be from you.

I DO HEREBY ATTEST THAT I MEET THE CRITERIA AS OUTLINED FOR FACC SCHOLARSHIPS AND THAT THE INFORMATION SUBMITTED IN AND WITH THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

Signature: _____

Date: _____

Please email this application, by January 31, to the FACC Administrative Office facc@flcities.com.