**FLORIDA ASSOCIATION OF CITY CLERKS**
**FACC Fall Academy Kay O'Halloran Memorial 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.**
- Applicant must have requested their municipality to underwrite the expenses of attending the Fall Academy. The scholarship is awarded by reimbursing the expenses after attending. A letter outlining that the municipality understands this must be attached to the application. If the applicant is underwriting the attendance, then that should be explained as well.
- Applicant must be a member and in good standing of the IIMC and the FACC.
- Applicant must present evidence attached to the application that their municipality or government body supports their attendance at the Fall Academy in the event the scholarship is awarded.
- Applicant must submit a letter of sponsorship from an eligible municipal clerk who is a second- or third-year Fall Academy participant, or a Fall Academy graduate.
- Any awarded funds are to be used solely for the purpose of expenses incurred to attend the Fall Academy. The total scholarship shall not exceed $500.00 per individual. More than one scholarship may be awarded based on the number of qualified applicants and available funds.
- Applicant must be actively pursuing the CMC or MMC designation. CMCs are encouraged to apply; applicants who have already obtained their MMC are not eligible.
- Scholarships shall not be awarded to any one individual more than once every three years.
- 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 attends the Fall Academy, they are to submit copies of their receipts to the FACC Executive Director's Office (via email preferred).
- A check, for the appropriate amount, will be mailed to your municipality. The cost of the Fall Academy will be deducted first, and then the balance will be applied toward remaining expenses. If the applicant bores the expenses on their own, they will need to explain that in writing so that a check is made payable to them.
- Should an applicant find they cannot attend the Fall Academy after being awarded, they must notify the Scholarship Chair immediately so that every effort is made to award the funds to the next appropriate applicant, with the FACC Board's approval.

**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.**

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**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 to attend the FACC Fall Academy (maximum award per applicant is $500.00).**

**Name: _____**

**Home Address: _____**

**City/State/Zip: _____ County: _____**

**Home Phone: _____ Cell Phone: _____**

**Job Title: _____**

**Municipality: _____**

**Municipality Address: _____**

**City/State/Zip: _____ County: _____**

**Work Phone: _____**

**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: _____**

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**Name of Municipality: _____**

**Job Title: _____**

**Years: _____**

**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**

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**If yes, which committee(s)?**

**_____**

**_____**

**_____**

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

**If yes, which committee(s)?**

**_____**

**_____**

**_____**

**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? _____**

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**For the below questions, please feel free to attach a separate sheet (limit responses to 250 words).**

**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:**

_____

_____

_____

**Please explain any hardship difficulties you may have that may prohibit your municipality from sponsoring your travel, continuing education, attendance at conferences or meetings, etc. as it relates to your position.**

**If none, check here _____**

_____

_____

_____

_____

_____

_____

**Explain your goals as city clerk/deputy clerk or other:**

_____

_____

_____

_____

_____

_____

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**Explain what it means to you to attend the Fall Academy:**

_____

_____

_____

_____

_____

_____

_____

**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.
- A letter from the mayor, manager/administrator, or governing body providing evidence that, if awarded a scholarship, the applicant has been granted permission and/or time off to attend the Summer Conference and Academy, and confirming that the municipality or governing body understands it is responsible for underwriting the applicant's expenses to attend. Following attendance, the applicant or municipality may submit a reimbursement request to FACC for eligible expenses up to the maximum scholarship amount awarded. If the applicant is personally underwriting all expenses, the reimbursement request may be submitted by the applicant.
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**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.**