



Application Form & Instructions for Western Region IPMA-HR Professional Development Scholarship

Section 1: General Information		
Name (First and Last):	Organization:	
Work address (Street, City, State, Zip):		
Work Telephone: Email Address:	Position/Title:	Certification:
Section 2: IPMA-HR Status		
<input type="checkbox"/> IPMA-HR National Member	<input type="checkbox"/> IPMA-HR Local Chapter Member	
<input type="checkbox"/> List Chapter: _____ (Local Chapter or National Membership is required. Attach documentation confirming membership)		
Section 3: Description and Rationale		
Describe your involvement in IPMA-HR at the local, regional, and/or national level and how a scholarship to attend an IPMA-HR professional development opportunity will help to advance your career in public-sector human resources. Please also identify which conference and/or training you would like to attend.		

I understand that my request will be considered by the Western Region IPMA-HR Awards & Recognition Committee and that I may or may not receive an award. I also understand that awards may be in any amount up to a maximum of \$1,000 per recipient and will be provided as reimbursement for qualified IPMA-HR professional development activities. I attest that I am a regular or student member of IPMA-HR and/or an IPMA-HR Local Chapter and that I have not and will not receive reimbursement from any other public funds for the professional development opportunity.

Signature of Applicant: _____ Date: _____

Western Region IPMA-HR Use Only:	Date of Board Meeting: _____	
Board recommends approval for \$ _____ to be disbursed on (date) _____		
Payment Date: _____ Check Number: _____		
Board recommends denial for reason listed below:		
<input type="checkbox"/> Not IPMA-HR member	<input type="checkbox"/> Not an emerging leader	<input type="checkbox"/> Other applicant(s) selected
Comments: _____		

Instructions for Completing the Western Region IPMA-HR Professional Development Scholarship Application (Please print or type all information)

Section 1-General Information:

1. Name: List your name as it appears on the IPMA-HR membership roster.
2. Agency/Division/Work Unit: No acronyms. List the agency, division and work unit where you perform your primary duties.
3. Work address, telephone, position/title: List your physical address and phone number at work, as well as your classification and/or working title.

Section 2- IPMA-HR Status:

You must attach documentation confirming your membership in IPMA-HR and/or your local chapter.

1. Check if you are an IPMA-HR National Member.
2. Check if you are an IPMA-HR Local Chapter Member and list your Chapter.

Section 3- Description and Rationale:

Indicate how you have participated in IPMA-HR and how you are developing as an emerging leader in both your career and IPMA-HR. Also indicate how the identified professional development opportunity will enhance your public-sector human resources career. Please sign the form and attach all relevant information.

Process:

Your application must be received by 5:00 pm on March 8, 2019. The Awards and Recognition Committee will review all applications and will respond to all applicants.

Submit completed applications to:
Christine Hoffmann, WRIPMA-HR
choffman@thprd.org