



## Alaska Government Finance Officers Association Conference Scholarship Application



### **General Information**

Scholarships cover the costs of registration fees *only*. If you are selected to receive a scholarship, please know you will be responsible for financing your own transportation, accommodations, and other expenses for the conference.

The scholarships are granted on an individual basis only and will not be granted to an organization. Scholarships are not transferable to another individual.

Unfortunately, the number of scholarships we can award is limited. Therefore, we must restrict these scholarships only to municipal staff that are not current or past members of AGFOA.

If you are eligible, please complete the following application and return it to Jill Reitz via email. **Please email your completed application to [jreitz@fnbalaska.com](mailto:jreitz@fnbalaska.com)** . *Incomplete applications will not be accepted.* If you are unable to email your application or you do not have access to a computer, please contact Jill Reitz, AGFOA Membership Committee Chair, at 907 777-4561.

**Applications will be accepted until \_\_\_\_\_** and selections will be made on a first-come, first-served basis. If you are selected, you will be asked to verify your acceptance of the Scholarship by a specified deadline, which AGFOA will provide you. If you do not accept the scholarship by the deadline given to you, your application will be forfeited and you will be placed on the scholarship waiting list.

If you apply and qualify, but are not selected to receive a scholarship you may register for the conference at the early registration rate regardless of when you apply for the scholarship.

**Applicant Contact Info**

Please provide us with the most reliable way to contact you. AGFOA prefers e-mail communication; however, if you do not have an e-mail address or access to a computer, we will be happy to communicate with you as you specify.

**Eligibility Criteria:**

- Currently employed in a government finance capacity**
- One application per entity**
- Not a past or current AGFOA member**
- First time attending an AGFOA conference**
- Applicant must intend to attend entire conference**
- Provide statement of need**

The best way to reach me is by (please choose one):

E-Mail                      Phone                      US Mail                      Fax

Applicant Name: \_\_\_\_\_

Position: \_\_\_\_\_

Entity: \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number \_\_\_\_\_ E-Mail \_\_\_\_\_

**Please answer these questions completely:**

1. Is anyone else from your entity attending the conference? yes, how many? \_\_\_\_\_ no
  
2. Have you previously attended an AGFOA conference? yes, what year? \_\_\_\_\_ no
  
3. Why do you want to attend the conference?
  
4. How will you share with others what you learn at the conference?
  
5. How are you willing to share your talents and help out at the conference?
  
6. How are you financing the remaining costs?
  
7. Describe your current work.
  
8. Statement of need - please attach a typed explanation of why you would like to attend the AGFOA conference.
  
9. Tell us what else you think we should know about you.