



## Member Scholarship/Grant Application

### APPLICATION FOR SCHOLARSHIP FUNDING

The Board of the Kansas City Chapter of IFMA and the Scholarship Committee will consider funding part of our professional members Education and Professional Development when the costs would not be covered by the members' employer. This grant would be for the member to attend an IFMA continuing education class or IFMA event e.g., World Workplace or Facility Fusion. Please complete the information below and email to [scholarship@ifmakc.org](mailto:scholarship@ifmakc.org)

Date: \_\_\_\_\_ (mm/dd/yyyy)

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Company Name: \_\_\_\_\_

Company Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_  Office  Home  Mobile

Alternate Phone: (\_\_\_\_) \_\_\_\_\_  Office  Home  Mobile

Email: \_\_\_\_\_

Alternate Email: \_\_\_\_\_

What type of scholarship are you applying for? e.g., World Workplace, IFMA Certification

Program; CFM, Continuing Education such as SFP, FMP

Amount requested: \$ \_\_\_\_\_

Highest Academic Level Achieved:

- High School
- Some College
- Associate Degree
- Under-Graduate Degree
- Master's Degree
- Technical Program or Business College

Years involved in Facility Management: \_\_\_\_\_

Years involved in IFMA: \_\_\_\_\_

Have you had committee involvement in the Kansas City Chapter of IFMA?  Yes  No

If yes, please list your involvement: \_\_\_\_\_

\_\_\_\_\_

If no, would you be willing to volunteer for the chapter in some capacity?

Yes  No

Area(s) of strength and/or interest – check all that apply:

- Education
- Professional Development
- Programs
- Scholarship
- Special Events
- Strategic Planning
- Membership
- Associate Relations
- Webpage
- Corporate Sponsorship
- Finance

Are you applying for one of IFMA’s Credentials and or Certifications?  Yes  No

If so, why do you want to achieve your CFM, FMP or SFP designation? \_\_\_\_\_

\_\_\_\_\_

Describe your major job activities and responsibilities related to facility management. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Does your company reimburse or pay for educational classes or certifications?  Yes  No

If yes, how much, or what percentage, is the reimbursement? \$ \_\_\_\_\_ or \_\_\_\_\_%

Any other information you would like to have considered? \_\_\_\_\_

\_\_\_\_\_

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