



## WILLIAM VOIGT, CAPP SCHOLARSHIP APPLICATION FORM

The following CAPP Scholarship Application Form is submitted to the CAPP Certification Board for the following scholarship applicant. All parts of this form must be completed and the application signed.

<b>Name:</b>	
<b>Title:</b>	
<b>Company:</b>	
<b>Address:</b>	
<b>City, State/Province, Zip/Postal Code:</b>	
<b>Phone:</b>	
<b>Email:</b>	

### **SCHOLARSHIP GUIDELINES:**

- ❖ Scholarship funds are available to individuals seeking professional development points who are intending to take the CAPP exam within 2 years or to recertify.
- ❖ The funds are available to offset registration fees and/or travel and lodging expenses.
- ❖ Scholarship award criteria includes the professional development plan identified in this application aligning with the CAPP content areas, progress toward CAPP certification or recertification, and documentation of financial need.
- ❖ Consideration will be given to IPMI members.
- ❖ CAPP applicants must have a minimum of 3 years managerial/supervisory experience.
- ❖ CAPP recertificants: minimum of 1 point in Program Type 4.
- ❖ Multiple requests from the same organization may be limited by the Board for each calendar year.

- ❖ Consideration will be given for IPMI related conferences/webinars, online courses and other related education or provided by IPMI allied state/regional associations.
- ❖ Consideration for other related education will be decided on a case-by-case basis.
- ❖ Scholarship funds will have a \$2,500 lifetime limit per requester.
- ❖ The CAPP Board reserves the right to reject any or all applications and may offer scholarships for less than what is requested
- ❖ Scholarship applications must be in six weeks prior to the educational event and will be reviewed by the CAPP Certification Board with a final determination and notification to the applicant within 30 days of submission.
- ❖ All deliberations of the CAPP Certification Board shall be confidential.

Completed applications and all necessary information, including questions must be submitted to [capp@parking-mobility.org](mailto:capp@parking-mobility.org).

**PLEASE COMPLETE ALL PAGES OF THIS FORM**

## WILLIAM VOIGT, CAPP SCHOLARSHIP APPLICATION FORM

Page Two

Your Name / Name of Applicant and Title :	
If recertifying: number of points you have accumulated to-date towards recertification and how did you complete Program Type 4?	
Please attach your in-progress CAPP Recertification Record Keeping Form found in the CAPP Recertification Guidelines or found online at parking-mobility.org/capp or by clicking <a href="#">here</a> .	
Please explain why scholarship funds are necessary. Use additional sheets if necessary.	
Explain how scholarship funds will be used. Please choose all of those which you would like to be considered for by choosing the applicable box for hotel, registration fees, and/or airfare/travel below:	
<b>Training Site:</b>	
<b>Dates:</b>	
<input type="checkbox"/> <b>Hotel/Lodging</b>	\$
<input type="checkbox"/> <b>Registration Fees</b>	\$
<input type="checkbox"/> <b>Airfare/Travel</b>	\$
Total amount of scholarship funds being requested in this application:	\$
Have you applied to your organization for the funds requested above?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If not, please explain why:	
Amount your organization has agreed to provide:	\$
Please explain the action taken on your request and by whom in your organization:	

Whether you are requesting funds for professional development to satisfy the CAPP application requirements, or recertifying, complete the chart on page 3. Indicate the name of the sessions/classes you are requesting funds for and which of the seven content areas of the CAPP Exam Content Outline the content satisfies in the columns below and the location of the class. For reference, please refer to the CAPP Candidate Handbook which can be found [here](#). The first line includes an example.



