

LONG ISLAND VILLAGE CLERKS AND TREASURERS ASSOCIATION
SCHOLARSHIP ANNUAL APPLICATION

Name: _____ Title: _____

Municipality: _____

Address: _____ PHONE _____

Email address _____

Affiliations: (Years) LIVCTA _____ NYSACVC _____ IIMC _____
NYSSMFO _____ GFOA _____

Name/Explanation of course/program you will be attending: _____

Location of program/class: _____ Dates: _____

Application to apply credits towards: CMC _____ MMC _____ AAE _____ OTHER* _____

*Please describe _____

This is my _____ year of attendance. Have you previously received a scholarship? _____

If so, When/Organization? _____

Anticipated Expenses	Village Reimbursement	Applicant's Portion
Tuition \$ _____	\$ _____	\$ _____
Lodging/Meals \$ _____	\$ _____	\$ _____
Transportation \$ _____	\$ _____	\$ _____

Other Scholarships being applied for: _____

NYSACVC \$ _____ IIMC \$ _____ OTHER* \$ _____

*Explain: _____

Please attach as part of your application the following items:

1. A brief resume including additional education and membership in related municipal organizations.
2. Copy of the advertisement/course description that you will be attending.
3. A statement from your Mayor and/or municipal board indicating their recommendation and support of your attendance at the Institute.

NOTE: (Must be completed and submitted prior to the training to be considered)

Signature of Applicant: _____ Date: _____

Return to:
Valerie Onorato
Deputy Administrator/Deputy Clerk
Village of Lynbrook
1 Columbus Drive
Lynbrook, NY 11563
vonorato@lynbrookvillage.com