The March 12-14, 2025, Annual Education Conference Scholarship Application is for current MiSGMP Planner, Educator, or Student Members Only.

**Submission Deadline**: 5:00 p.m. EST, January 31, 2025

**Submit Application to**: scholarships@misgmp.org

**Section 1 – Applicant’s Information**

**Name**: Click or tap here to enter text.

**Email Address**: Click or tap here to enter text.

**Agency/Employer/Institution**: Click or tap here to enter text.

**Work Phone Number**: Click or tap here to enter text.

**Cell Phone Number**: Click or tap here to enter text.

**I am seeking ☐ partial or ☐ full financial assistance for:**

☐ Lodging ($85/night + taxes) **Select One:** ☐ One Night ☐ Two Nights

☐ Conference Registration

**Section 2 – Applicant’s Involvement with MiSGMP**

(Unless otherwise noted, responses should be based on calendar 2024 activities).

1. **MiSGMP Membership Status**

☐Planner ☐ Student ☐ Educator

1. **Length of MiSGMP Membership**

☐ 1-2 years (3 points) ☐ 3 years or more (5 points)

1. **Certifications and Certificates** (10 points each) Confirm by noting the year received or renewed.

☐CGMP Click or tap to enter a date. ☐ CMP Click or tap to enter a date.

☐CHSP Click or tap to enter a date. ☐ CHSC Click or tap to enter a date.

☐ GMS Click or tap to enter a date.

☐ Other Click or tap here to enter text. Click or tap to enter a date.

☐ Other Click or tap here to enter text. Click or tap to enter a date.

1. **Monthly Meeting Attendance** (2 points per meeting attended). If all were attended, an extra 5 points will be awarded. Check months attended February 2024 through December 2024

☐February ☐ March (AEC) ☐ April ☐ May

☐ June ☐ August ☐ September ☐ October

☐ November ☐ December

1. **Monthly Meeting Speaker or Panel Member** (10 points per engagement). Provide details and include copies of agenda/program and/or recap from a newsletter article.

Click or tap here to enter text.

1. **Committee Involvement** List committee which you are/were a contributing and active member, including your accomplishments on those committees (Up to 5 points per committee; 10 points if chair/co-chair). **Applicant must have Committee Chair/Co-Chair (or MiSGMP President where applicant is current Committee Chair/Co-Chair) complete committee member report(s), page 4.**

Click or tap here to enter text.

1. **New Member Recruitment** (8 points per new member, maximum 5 members (40 points). Membership Committee Chair exempt. List new member(s) name.

Click or tap here to enter text.

1. **Chapter Newsletter Contribution** (5 points per article). List title and date published. The article written as part of previous scholarship requirement cannot be included.

Click or tap here to enter text.

1. **Previous Annual Education Conference (AEC) attendance** (1 point per year, 3 points maximum). List year and Location.

Click or tap to enter a date.

Click or tap to enter a date.

 Click or tap to enter a date.

 Click or tap to enter a date.

1. **National Involvement** (10 points each). Articles published in the Government Connection magazine; presenter at NEC; volunteer at NEC; national committee member. Provide details below. (Copies of articles, NEC agenda/program or verification by SGMP for volunteering and/or committee verification must be included).

Click or tap here to enter text.

1. **Support of MiSGMP** (10 points maximum). Describe other ways you support MiSGMP and participate in chapter activities (fundraising, community service projects, mentoring, etc.).

Click or tap here to enter text.

1. **Are you receiving AEC funds from another source(s), including your place of employment?**

☐ No ☐ Yes ☐ Partial, please explain: Click or tap here to enter text.

1. I confirm that I have read and understand the responsibilities set forth in this application for scholarship funds and that my failure to abide by this agreement could result in a request for repayment or part of all the prepaid and complimentary items I am scheduled to receive.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant Signature Date

1. By signing below, I approve of the travel and time away for the applicant listed above to attend the 2025 Michigan Chapter of the Society of Government Meeting Professional’s Annual Education Conference on March 12-14, 2025, in Mt. Pleasant, Michigan



\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant’s Supervisor Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Supervisor’s Printed Name Date



Agency/Employer/Institution: Click or tap here to enter text.

**Section 3 – For Educator and Student Member Applicants ONLY**

1. **Name of Education Institution:** Click or tap here to enter text.

For Student Applicants Only

1. **Student Status** (If applicable, documentation required).

☐ Junior ☐ Senior ☐ Other, explain:

1. **Course of study/degree program:** Click or tap here to enter text.

For Educator Applicants Only

1. **List the applicable course(s) you are currently teaching** (documentation required).

Click or tap here to enter text.

**MiSGMP Committee Member Report**

***To be completed by Committee Chair/Co-Chair, Membership Committee Chair/Co-Chair, or MiSGMP President where applicable and shall be signed by the Committee Chair/Co-Chair or MiSGMP President.***

**Member’s Name:** Click or tap here to enter text.

**Committee:**

1. Please rate this member’s participation in committee activities. **1 is not very active – 5 is very active.**

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

1. Please rate this member’s enthusiasm for MiSGMP. **1 is not very active – 5 is very active.**

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

1. Please rate the likelihood of this member to serve in a future chapter leadership role. **1 is not very active – 5 is very active.**

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

1. List any specific accomplishments by this committee member.

Click or tap here to enter text.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Committee Chair/Co-Chair or MiSGMP President Date

