WGFOA CPFO Enrollment Scholarship Application

GFOA ID Number

WGFOA will award up to four enrollment scholarships annually to cover the \$1,200 enrollment fee for two years of enrollment in GFOA's CPFO program. To apply fill out the below application.

Name

Copy of job description attached.

Application received by January 1 deadline

Job Title				
Organizatio	on	Municipality Population		
Address		City/State/zip code		
Highest lev	rel of schooling completed			
Years (#) of	f Public Sector Experience			
Select all that apply: I have been a WGFOA Board Membe		WGFOA Speaker	Conference Attendee	
	d that I must fulfill all of the requirements in order t you meet the criteria.	to receive the award. Plea	ase check the following boxes	
	Application deadline for the scholarship must be submitted to the WGFOA President no later than January 1 unless extended by the WGFOA Board President to a later date.			
	I am an active member and have paid my dues for the current calendar year. Student members are eligible for this scholarship. I understand this scholarship does not include business or Honorary members.			
	I am a paying member of WGOA for one year and have attended two WGFOA conferences over a three year period prior to the application deadline.			
	I am not enrolled in the new CPFO program.			
	I intend to be an ongoing member of WGFOA and continue to attend WGFOA conferences.			
	I have attached a current copy of my job description.			
	Signature	Date		
For more in	nformation please go to: www.wgfoa.com/about/s	<u>cholarships</u>		
Office use				
Atte	ended two WGFOA conferences in the past three ye	ears		
An	active member of WGFOA for the past year			
Paid	d membership dues for this calendar year			