

Conference Scholarship Application **2022**

| Name: | Phone: |
|------------------------------------|---|
| Address: | |
| | Zip: |
| Email: | |
| | d, unless student): |
| Current Employment | |
| Agency (Must be a CPRS Member Ag | gency within District 13): |
| Length of employment: | Hours per week: |
| Job Title/Classification: | |
| | onference fees? Yes No If yes, who is budgeted to |
| | |
| How many people generally attend o | conference per year from your agency? |
| CPRS Involvement | |
| Have you ever attended the CPRS co | nference before? |
| Yes How many times? | _ |
| No Why not? | |
| | |
| What involvement have you had wit | h CPRS? |
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| How will this scholarship help you become more involved with CPRS in the future? | |
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| What are you hoping to gain professionally for | rom attending the CPRS Conference? |
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| | |
| | |
| Applicant's Signature: | Date: |

Please attach letter of recommendation to application and return to:

Nanette Palacios-Duron City of Whittier 7630 Washington Avenue Whittier, CA 90602 CPRSD13@GMAIL.COM