

Y's MEN INTERNATIONAL – US AREA  
Alexander Scholarship Fund Program

DOLLARS FOR SCHOLARS GRANT APPLICATION

*(Only YMCA professionals and staff are eligible to apply to attend a short course or training class)*

Print legibly and complete application as thoroughly as possible. Insufficient information may cause delay in approving your request.

Name: \_\_\_\_\_ YMCA branch/office: \_\_\_\_\_

Mailing address: \_\_\_\_\_

Day Phone # \_\_\_\_\_ FAX \_\_\_\_\_ E-mail address \_\_\_\_\_

1. What is your current position at the Y, and what are your major responsibilities? \_\_\_\_\_

\_\_\_\_\_

2. How long have you been employed by the YMCA, and how long have you held your current position? \_\_\_\_\_

\_\_\_\_\_

3. For what course or training opportunity are you requesting assistance? \_\_\_\_\_

\_\_\_\_\_

4. What are the dates of the course or training you are requesting assistance for? \_\_\_\_\_

5. Briefly explain the value of this course or training opportunity to you and the YMCA: \_\_\_\_\_

\_\_\_\_\_

6. Where will this course or training be held, and how far is it from home? \_\_\_\_\_

\_\_\_\_\_

7. What is the total cost of this course or training event? (include all fees, lodging, meals and travel expenses). \$ \_\_\_\_\_

8. Are you receiving or expecting any other financial assistance for this training? **Yes or No.** If Yes, how much? \$ \_\_\_\_\_

9. Upon course completion, will you provide us a short write-up of what you learned and experienced at the training? **Yes or No**

10. To whom should a check be written to, and when is payment due? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Applicants signature & date

Supervisor's signature & date

Mail this completed application to:  
Dean Currie, ASD/ASF  
Dollars for Scholars application  
629 Lantana Lane  
Imperial, CA 92251

\_\_\_\_\_ Legibly PRINT Supervisors name