

## **Foundation Scholarship Application**

CONFERENCE OR SEMINA	R SELECTED FOR SCHOLARSHIP
	Conference or Seminar Name
	Date of Program
Applicant:	
Organization:	
Address:	City, State Zip:
	Phone:
Email:	Years of Banking Experience
Scholarship Sponsor	elected above acting as scholarship sponsor.
	Title:
Email:	Phone:
SCHOLARSHIP REQUEST:	
Please provide a few sentences a development of the applicant ar	about how this scholarship will contribute to the educational and professional and your bank.

## **ELIGIBILITY INFORMATION**

- Awarded based on the appropriateness of the educational opportunity related to the applicant's job.
- Subject to availability.
- Designed to cover the registration cost and materials for not more than two employees per institution for specific educational programs.
- Individual bank employees are eligible to receive one scholarship per calendar year.
- Eligibility is limited to employees of member banks who already have purchased at least one seat to attend the same training program.
- The training director or the HR lead for the institution must submit the scholarship application no later than 5 days prior to the scheduled training.
- Scholarship applications should be submitted for each individual requesting the award.

## Thank you for utilizing the PACB Foundation's Scholarship Program!

The program is designed to expand the opportunity for community bankers to access and utilize education that will enhance their careers and augment professional and personal development.

