



MCADSV Member Conference/Training Scholarship Request Form

Name: _____

Organization: _____

Type of MCADSV Member (check one): Organizational _____ Individual _____

Name and Date of Conference/Training: _____

Location of Conference/Training: _____

Phone Number or Email Address: _____

Please fill out form completely, if does not apply please put NA.

	Actual Cost	Applicant Organization's Contribution
Registration Fee:		
Lodging: (\$ x days=total) (State rate for location) *Please see directions page		
Transportation: ____ Airline ____ Mileage (.485 per mile) *Please see directions page		
Misc. Fees: _____ _____ _____		
TOTAL:		

In order to receive a scholarship, you must be a MCADSV member and membership dues must be paid for the year 30 days prior to the conference/training

By requesting this scholarship it does not guarantee that MCADSV will provide you or your organization with a scholarship. Either way you will be notified no later than one week after the scholarship deadline.



Please answer the following questions:

- 1.) What is the need for this conference/training in your line of work?

- 2.) How will this conference/training benefit you or your organization?

- 3.) Are you currently working directly with domestic violence victims: Yes or No (circle one), Please explain.

- 4.) Are you currently working directly with sexual assault victims: Yes or No (circle one), Please explain.

- 5.) When was the last time you or your organization received a scholarship from MCADSV to attend a conference/training?

Scholarship Applicant

Date

Supervisor of the Applicant

Date

Due to the high amount of scholarship applications received, please note that this scholarship request will NOT be able to be considered if:

- You are not a member of MCADSV or membership fees have not been paid for the 2008 calendar year 30 days prior to the training
- Your supervisor has not signed the form
- The form is received later than the scholarship deadline
- Questions on the form are not completed (remember to please put NA if not applicable)

Please send or fax form back to MCADSV

Attention: Kelly Myhro

Fax: 406-443-7818

P.O. Box 818

Helena, MT 59624

Scholarship questions please call: 406-443-7794 x7



**Montana Coalition Against Domestic & Sexual Violence
Directions for Completing the
2008 Scholarship Request Form:**

Due to federal grant regulations, MCADSV can only reimburse at state or federal rates.

When traveling outside of Montana

The following link to the U.S. General Services Administration website will help to determine the state rate (Lodging) for the location of the training.

<http://www.gsa.gov/Portal/gsa/ep/home.do?tabId=0>

When traveling inside Montana

The link to the Montana Department of Transportation website will need to be used to determine the mileage. (<http://www.mdt.mt.gov/travinfo/scripts/citydist.pl>) Please do not use Map Quest, mileage is figured out city to city and not by street address. **If your location is not listed please contact MCADSV.**

Please note that MCADSV will reimburse for the cost of a rental car if the cost of the rental car and gas are more cost effective than paying for mileage.

Per Diem is no longer covered and will not be offered to scholarship recipients.

Lodging is determined by the U.S. General Services Administration. MCADSV only pays Montana's base rate: 2008 in state lodging \$70.00 + tax state rate for single.

MCADSV will only cover room/lodging taxes. MCADSV will not cover any extra's charged to your hotel room, including but not limited to, alcohol, movies, internet service, any phone calls, food or smoking in a nonsmoking room.

It is important to fill out the **Applicant Organizations Contribution** portion of this form. Be sure to put what your organization is willing to contribute (or NA if not applicable). Knowing what your organization is willing to contribute will allow MCADSV to maximize scholarship awards.

The granting of scholarships will be based on the following checklist:

1. MCADSV Member? Yes or No
2. Membership dues paid? Yes or No Date paid: _____
3. Scholarship form received by scholarship deadline? Yes or No
4. Supervisor signed scholarship form? Yes or No
5. Scholarship form questions completed? Yes or No

***Please note that when considering scholarship applicants, MCADSV will give priority to programs that have limited travel funds, as well as for programs that work directly with victims.**