## A6010.2. WBEA First-Time Attendee Scholarship

**Western Business Education Association**

**FIRST TIME ATTENDEE SCHOLARSHIP**

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The Western Business Education Assocation (WBEA) announces the annual WBEA First-Time Attendee Scholarship. This scholarship is provided to help individuals attend the annual WBEA conference. It is offered and managed by the WBEA Executive Board through the WBEA Awards and Scholarship Director. Funding for the scholarship will be through donations from individuals, companies, and other sources.

**Amount: $500.00**

**Application Process:**

Applicants must:

1. Have never previously attended the annual WBEA conference,
2. Attend the Professional Development Leadership Training (PDLT) session during the conference.

Please send the completed application form electronically by December 1 to Ariel Dykstra at adykstra@mvsd320.org

**Deadlines and Dates:**

1. All applications must be submitted by December 1.
2. The scholarship recipient will be informed of his/her receiving the scholarship no later than December 15.
3. The recipient will be recognized in the WBEA newsletter.
4. Reimbursement will be made by the WBEA Treasurer by June 30 upon attendance of the conference and the PDLT session.

**Handling of Funds:** All funds for the scholarship will be administered by the Awards and Scholarship Director and the WBEA Treasurer.

Contributions to the Fund: Contributions to the WBEA First-Time Attendee Scholarship can be made in any amount payable to the Western Business Education Assocation (WBEA). The contributions can be made to honor a business/computer educator who is retiring, a business educator or administrator who is involved in teaching/administrating, or a deceased member.

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***Western Business Education Association***

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| ***APPLICANT INFORMATION:*** | | | | | |
| Full Name of Applicant: Click here to enter text. | | | | | |
| Home Address: Click here to enter text. | | | | | |
| City: Click here to enter text. | State: Click here to enter text. | | | Zip Code: Click here to enter text. | |
| E-mail address: Click here to enter text. | | | | | |
| Cell Phone: Click here to enter text. | | | | | |
| Current Position or Position Held on local S/T/P Board: Click here to enter text. | | | | | |
| Current School: Click here to enter text. | | | | | |
| School Address: Click here to enter text. | | | | | |
| City: Click here to enter text. | | State: Click here to enter text. | | | Zip Code: Click here to enter text. |
| NBEA Membership #: Click here to enter text. | | | S/T/P Region: Click here to enter text. | | |
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| Please describe how the total cost of the conference is currently expected to be paid. For example, are you paying the total cost of attending the conference, are the costs being divided between multiple sources, etc.  Click here to enter text. | | | | | |
| How will attending the WBEA conference benefit you?  Click here to enter text. | | | | | |