

**SUBMIT BY EMAIL
DUE BY FEBRUARY 28, 2021**

KENTUCKY MUNICIPAL CLERKS ASSOCIATION

Kitty Johnson Scholarship Application



Background: The Education Foundation was created in 1987 to memorialize the contributions made by Kitty Johnson, retired Council Clerk of Lexington, to the Kentucky Municipal Clerks Association. Ms. Johnson was a founding member of the Association and was instrumental in initiating the Kentucky Municipal Clerks Certification Program in 1980. The KMCA Board wishes to continue the vision of Kitty, that all Kentucky Clerks have the opportunity for educational development.

I, _____ do hereby apply for scholarship assistance from the KMCA to enter a program of study at an approved Kentucky Municipal Clerks Institute. I am aware that the scholarship is awarded to an individual not to the City, that the award covers the current registration cost only of the Institute and is awarded on an annual basis. Clerks are encouraged to apply each year that a financial need exists.

Name: _____

Title: _____

Municipal Employer: _____

Mailing Address: _____

City: _____ **Telephone:** _____ **Fax:** _____

Email Address: _____

I am a member of the Kentucky Municipal Clerks Association (KMCA) Yes ___ No ___
(If no, you are ineligible for this scholarship)

Have you attended the Kentucky Municipal Clerks Institute before? Yes ___ No ___
(If yes, what year of attendance will this year be? (First, Second, or Third) _____)

Population of Municipality: _____

Date present position assumed: _____

Other related municipal experience:
(Municipality/Title/Years)

Have you applied for other scholarship assistance for this session of the Institute?

Yes ___ **No** ___ **Source:** _____ **Amount:** _____

Is there anything the Board should consider in assessing your financial need for this scholarship?

Have you obtained permission from your Municipality for time off to attend the Institute? Yes _____ **No** _____

To be considered for this scholarship, you should provide the following:

- 1. Brief explanation of your financial needs**
- 2. Copy of most recent balance sheet from your municipality's general fund**
- 3. Letter from your Mayor, City Administrator or City Manager, that your municipality supports your attendance at the Institute**

I understand that if a scholarship is awarded to me it must be used for the 2021 session and will be reimbursed upon verification that the clerk attended all training sessions.

I do hereby attest that the information submitted in and with this application is true and correct.

Signature

Date

RETURN COMPLETED APPLICATION TO:

Julia Atkins, Deputy City Clerk
City of Lawrenceburg
P.O. Box 291
Lawrenceburg, KY 40342
Email: jatkins@lawrenceburgky.org

*****All applications must be returned by 3:00 p.m. (EST) February 28, 2021 for the 2021 Session of the Kentucky Municipal Clerks Institute by Email or Traditional Mail*****