



Training/Travel Scholarship Approval Form

North American Hazardous Materials Management Association (NAHMMA)

Florida Chapter

INSTRUCTIONS: Complete this form if you require financial assistance to attend a NAHMMA Workshop and return via:

E-Mail to: rita.perini@brevardfl.gov

Or

Mail or Fax to:

Rita Perini
 Treasurer, Florida NAHMMA Chapter
 Brevard County Solid Waste Operations
 2250 Adamson Road
 Cocoa, FL 32926
 Phone: (321) 633-1888
 Fax: (321) 635-7903

FINANCIAL ASSISTANCE POLICY: The FL NAHMMA Workshop Steering Committee is providing a limited number of scholarships for chapter and national NAHMMA workshops.

To be eligible for a scholarship, you *must* be a NAHMMA member and attend all days of the workshop. If not currently a member, you *must* become a member at you or your agency's expense – *prior to attending the conference.*

It is also expected that the recipient participate on a NAHMMA chapter committee and be an ambassador for the association.

The recipient of this scholarship *must* provide receipts to substantiate their claimed registration and travel expenses including lodging and airfare and receipts for any authorized expenses incurred for reasons acceptable to NAHMMA.

The FL NAHMMA Chapter may reimburse costs up to and not exceeding \$550. For further information, please contact a NAHMMA chapter Officer.

Visit us on the web at:
www.nahmma.org

THIS SECTION FOR OFFICE USE ONLY	
Date:	
Authorization Amount:	
Reference:	
Reference:	
Reference:	

RECIPIENT NAME		REPRESENTING AGENCY/ORGANIZATION NAME	
OFFICE PHONE NUMBER		MOBILE PHONE NUMBER	
MAILING ADDRESS		EMAIL ADDRESS	
CITY	STATE	ZIP CODE	

DESCRIPTION

WORKSHOP	LOCATION*	DATES ATTENDING*	ESTIMATED COST
*NOT REQUIRED FOR WEB-BASED TRAININGS.		TOTAL	

COMMITTEE COMMITMENT:

BY SIGNATURES BELOW, THE SCHOLARSHIP RECIPIENT AND A NAHMMA CERTIFYING OFFICIAL CERTIFY THAT THAT ALL SCHOLARSHIP REQUIREMENTS ARE MET AND THAT ALL INTERNAL REVIEWS/APPROVALS REQUIRED BY THE NAHMMA OFFICERS HAVE BEEN COMPLETED.

SIGNATURE OF SCHOLARSHIP RECIPIENT	DATE
SIGNATURE OF CERTIFYING CHAPTER OFFICIAL	DATE