



**Colorado Lake and Reservoir Management Association
Scholarship/Training Reimbursement Program**

CLRMA may grant scholarships in the form of reimbursement for fees related to classes, tuition, training, seminars or conferences may be given out as approved by the CLRMA Board of Directors. The Board may decide award all or a portion of the amount requested. CLRMA may also waive or reduce fees for CLRMA events. Current CLRMA members are eligible to apply.

Scholarship shall fit within the purpose of CLRMA, which is to promote the understanding and comprehensive management of lakes, reservoirs and their watersheds. The Association's objectives include:

- Providing a forum for sharing of information and experiences on scientific, administrative, legal and financial aspects of lake, reservoir and watershed management.
- Foster the cooperation and interaction of public and private individuals, agencies, organizations and units of government involved in lake, reservoir and watershed management.
- Assist in the development of local, state and national lake and reservoir programs consistent with appropriate management strategies and techniques.

Requests for waived registration fees must be submitted with the registration form and must be received at least 10 working days prior to the event. Persons seeking reimbursement will submit an application which will be approved by the CLRMA Board prior to funds being released. Funds will not be released until the class/training has been completed. Proof of attendance/completion will be required.

Scholarships may be awarded using the following criteria (see above if approved):

- Availability of funds
- Level of active participation in CLRMA and/or NALMS
- For non-CLRMA events, relevance of material covered related to CLRMA's goals and mission
- For non-CLRMA events, accreditation of the entity providing the event
- Continuing Education Credits
- Requirement for CLM certification, degree or license
- Financial need of applicant
- Amount of previously awarded funds
- Previous awards or requests



Scholarship Application

Contact Information:

Name: _____ E-mail: _____
Organization: _____ CLRMA Member: Y N
Address: _____ Amount Requested: \$ _____
State: _____ Zip code: _____
Phone: _____

Statement of Need:

Description of Conference, Seminar, Training or Class:

_____ (Please attach any pertinent information related to the class such as registration information and description.)

Description of how class/training applies to CLRMA's purpose:
