

South Carolina Business Licensing Officials Training Institute

Scholarship Application

Sponsored By South Carolina Business Licensing Officials Association

**** Please note: you must be a member of the SC Business Licensing Officials Association (BLOA) to receive the scholarship. ****

Personal Information

Name: _____

Local Government: _____

List active memberships in government related organizations: _____

List all workshops and conferences attended in the past two years related to municipal government:

Have you attended past sessions of the BLOA Training Institute?

Yes ___ No ___ If Yes, list dates attended: _____

Current Position

Local Government: _____

Address: _____ Business Phone: _____

Business E-mail: _____

Title or Position: _____

Description of Present Duties: _____

Percentage of your time during last year spent in business licensing activity: _____

Number of years employed in local government work: _____

Employment Record

Dates	Title or Position	Company	City, State
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Benefits Expected

(Applicant may answer questions below on a separate page if needed)

What benefits do you hope to derive from attending the BLOA Training Institute?

Why are you are applying for the BLOA Training Institute Scholarship?

Commitment

If given the scholarship, I plan to complete all sessions of the Institute as they are offered over the next three years.

Applicant's Signature: _____ Date: _____

I will fully support the financial and time commitment required under this program.

Employer's Signature: _____ Date: _____

Title: _____

General Information

The scholarship will cover the registration fees for the BLOA Training Institute (up to three sessions) and one sitting of the ABL exam. *Applicant must be a member of BLOA*; applicant must be willing to complete the three year course if selected; the majority of an applicant's job duties must be related to business licensing and the applicant's local government must be fully supportive of the financial and time commitment required under this program.

Remit to: Elizabeth Copeland
ecopeland@masc.sc

**Applications must be submitted by
Friday, March 1, 2019**
