



## Ohio Association of Soil and Water Conservation District Employees

### SWCD Staff Continuing Education Scholarship Application

A scholarship will be awarded annually to one selected applicant.

To be eligible, the applicant must be a current member of the OASWCDE who has been a dues paying member for a minimum of three years prior to the application deadline.

The amount of this Continuing Education Scholarship will be up to **\$300**.

The primary intent of the scholarship is to assist with the professional development of current SWCD employees for tuition, registration, books, etc. of courses taken during the current calendar year. The assistance is meant to be used for trainings not traditionally required by a District's Board of Supervisors. Programs offered by ODA, OFSWCD, and NACD are NOT eligible; however, college courses and continuing education programs outside of our organization and aforementioned affiliates ARE eligible.

Reimbursement of out of pocket expenses will occur once the winning applicant has submitted proof of attendance for the continuing education training to the OASWCDE Board of Directors.

The scholarship recipient will be selected by the OASWCDE Board of Directors. The Board reserves the right not to name a winner if it is determined that the criteria has not been met by the applicants.

Scholarships will be presented during Monday's luncheon of the OFSWCD Summer Supervisors School.

**Application deadline is June 10<sup>th</sup> of the current year.**

Mail or email the completed application to:

Bonnie Dailey  
Delaware Soil & Water Conservation District  
557 Sunbury Road, Suite A  
Delaware, OH 43015-8656  
[BDailey@co.delaware.co.us](mailto:BDailey@co.delaware.co.us)



## Ohio Association of Soil and Water Conservation District Employees

### SWCD Staff Continuing Education Scholarship Application

Applicant's Name:

Phone Number:

Address:

District:

Title:

Training Topic or Class for which the Scholarship will be Used:

Estimated Time of Completion:

Estimated Out of Pocket Expenses to Take Training:

Expense Reimbursement to:       SWCD Board       Applicant

Please describe how this training will assist in your professional development.

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Applicant's Signature

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Date