



# MICHIGAN ENVIRONMENTAL HEALTH ASSOCIATION

An organization of professionals dedicated to the improvement of health through management of the environment.

## SCHOLARSHIP APPLICATION FOR FOOD PROTECTION RELATED TRAINING At MEHA's 2010 ANNUAL EDUCATION CONFERENCE

MEHA is offering scholarships to support MEHA member attendance of the food related training offered at the 2010 MEHA AEC. A \$5,000 grant from the Michigan Department of Agriculture's Food Safety Education Fund supports the scholarship program. Scholarships will be approved as applications are received until the \$5,000 grant amount is expended. Note the scholarship rules listed below.

Applicant Name: \_\_\_\_\_

Agency/Organization \_\_\_\_\_

Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-Mail: \_\_\_\_\_

### Scholarship Rules:

- Only active MEHA members who attend the food safety related programs at the 2010 AEC will be considered for scholarships.
- Scholarship applications must be submitted by February 24, 2010. Recipients will be notified within seven days of receipt of their application of scholarship approval.
- Partial or full scholarships up to \$250.00 will be awarded based on individual circumstances.
- Applications will be considered when a person has been denied similar training funds by their employer. The Supervisor's Statement portion of the application must be completed and signed by the applicants' supervisor.
- Reimbursable expenses are limited to conference registration fees, motel fees, and/or meals.
- All AEC expenses must be paid by the applicant then reimbursement requested from MEHA.
- The applicant must provide copies of receipts within 14 days after the AEC. Reimbursement will be paid directly to the scholarship recipient.
- A brief paragraph identifying the food safety training attended during the AEC must accompany the reimbursement request.

Scholarship amount requested (estimated expenses): \$ \_\_\_\_\_  
Scholarship funds will be used for: Conference Registration Fee \$ \_\_\_\_\_  
Doubletree Room Fees \$ \_\_\_\_\_  
Meals \$ \_\_\_\_\_

### Supervisor Statement:

As supervisor of \_\_\_\_\_, I verify he/she will not be provided with similar funding as requested above to attend the 2010 MEHA Annual Educational Conference.

Supervisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Supervisor Name & Title: \_\_\_\_\_

Submit application by February 24, 2010 to: MEHA c/o Lynne Madison, Fax 906-482-9410 or  
[lmadison@hline.org](mailto:lmadison@hline.org).