



## Greater Madison Area Society for Human Resource Management Professional Scholarship Program Application

If the space provided in any section is inadequate, you may continue on additional sheets of paper using the same format. DO NOT repeat information already reported on the application form. Your name should be included on all attachments.

<b>Applicant Data</b>			
Full Name	Telephone	E-Mail	
Street	City	State	Zip
<b>SHRM Involvement, Awards and Honors</b>			
List all SHRM related activities in which you have participated at the local, state, and national level. Note all special awards, honors, and offices held. If you have participated in a research project, please indicate that experience as well.			
Activity	# of Years Participated	Special Awards / Honors	Office Held
<b>Company / Community Involvement in Promotion and Advancement of HR Field</b>			
List all company and/or community activities (outside of SHRM) in which you have participated involving the advancement and promotion of the HR field. Note all special awards, honors, and office held. If you have participated in a research project, please indicate that experience as well.			
Activity	Result	Special Awards / Honors	

GMA SHRM Professional Scholarship Program Application

**Applicant Checklist**

The applicant is responsible for submitting all materials to GMA SHRM on time. Incomplete applications will not be evaluated. This application becomes complete and valid only when GMA SHRM receives all of the following materials:

- Scholarship Application
- Purpose Statement
- Resume

Please submit all materials to:

Greater Madison Area SHRM, Inc.  
ATTN: Scholarship Committee  
2830 Agriculture Dr.  
Madison, WI 53718

**Certification and Acknowledgement**

GMA SHRM has the sole responsibility for selecting recipients based on criteria as set forth in the scholarship guidelines. This application becomes the property of GMA SHRM. GMA SHRM recommends you keep a copy in your files.

I acknowledge the decisions of GMA SHRM are final. I certify that I meet the basic eligibility requirements of the program as described in the brochure and the information provided is complete and accurate to the best of my knowledge. If requested, I agree to provide proof of information I have given on this form. Falsification of information may result in forfeiture of any scholarship granted and/or repayment for any related reimbursements.

Signature

Date