



Certification Scholarship

The Charlotte County SHRM Board is committed to supporting its members' pursuit of HR professional certification. To that end, **scholarships are available for professional development**, specifically for either SHRM or HRCI Certification.

Members in good standing are invited to **apply for a scholarship** in writing using the **Letter of Intent form**, which is attached and accessible via the CCSHRM website. Applications will be reviewed by a committee appointed by the Board, or by a majority of the Board in the absence of such a committee.

Application submission options:

- Mail to **Charlotte County SHRM, P.O. Box 494972, Port Charlotte, FL 33952**
- Email to president@cc-shrm.com
- Hand delivery to any **current CCSHRM board member**.

Scholarship approvals are contingent upon available funding, the applicant's financial need, and any additional criteria established by the Board, as detailed in the Letter of Intent and communicated to the general membership. All funding decisions are at the sole discretion of the Board, and any unutilized funds may be rolled over to subsequent years.

Applicants must include a **Statement of Interest**, limited to one page (up to 500 words). This statement should articulate your interest in human resource management, your career aspirations, relevant work and volunteer experiences, your objectives as an HR professional, and how this scholarship will assist you in achieving these goals. Please also address any financial need you may have.



Annual Professional Certification Scholarship: Letter of Intent

I, _____, understand and agree to fulfill all requirements of the Charlotte County SHRM Scholarship Program, as outlined in the chapter's By-Laws.

As a scholarship recipient, I acknowledge the following obligations:

1. **Exam Completion:** I will complete all eligibility requirements and sit for a SHRM or HRCI certification exam within **six (6) months** of receiving the scholarship.
2. **Continuing Education:** I will pursue continuing education credits for recertification, which may include attending SHRM/HRCI approved CCSHRM General Membership meetings, seminars, and conferences (local, state, or national).
3. **Funding Disbursement:** I understand that scholarship funds will be disbursed only after I successfully complete the approved training.

I further understand that failing to meet these obligations will result in automatic disqualification from future scholarship consideration. If awarded a scholarship, I intend to use the funds according to Charlotte County SHRM by-laws. If I deviate from this purpose or fail to meet any of the stated obligations, I agree to **refund all the money awarded** to Charlotte County SHRM in a timely manner.

Applicant Signature: _____

Date: _____

Scholarship Committee Use Only:

Status: _____

Reason: _____

Amount: _____

Decision Date: _____

Notification Date: _____

Follow Up Date: _____

