



CP Cal Conference XIII

Financial Need Scholarship Application

Instructions: Please respond to the questions below. All information will be kept strictly confidential except for a small committee that reviews the applications.

1. Please provide your contact information below:

First Name: _____

Last Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____ Phone: _____

2. How did you first learn about the scholarship program?

- CP Cal Website
- Conference Brochure
- Email from CP Cal
- Friend or Colleague
- Other (please specify): _____

3. Please indicate your primary professional designation:

- Attorney
- Mental Health Professional
- Financial Professional
- Other (please specify): _____

4. Membership in CP Cal member group:

- Yes, I am a member of a CP Cal member group (please specify which one):

- No, I am not a member of a CP Cal member group

5. Have you attended a previous CP Cal Conference?

- Yes
- No

6. Will you receive any funding support from your employer or other source outside CP Cal?

- No
- A portion of expenses are paid
- All expenses are paid

7. What is your current gross earned income?

- Less than \$30K
- \$30K - \$44K
- \$45K - \$59K
- \$60K – \$75K
- Greater than \$75K

8. How many people in your household are financially dependent on you? (Not including yourself)

- 0
- 1
- 2
- 3
- 4
- 5

9. What is your total household gross income?

- Less than \$30K
- \$30K - \$44K
- \$45K - \$59K
- \$60K – \$75K
- Greater than \$75K

10. What is your current employment status? (Please select one)

- Full-time Employed
- Full-time Self-Employed
- Part-time Employed
- Part-time Self-Employed
- Student
- Not currently Employed

11. How would your attendance at this Conference benefit your local Collaborative community? (Please limit to 150 words)

12. Are there any additional circumstances the CP Cal Scholarship Committee should consider? (Please limit to 150 words)



SCHOLARSHIP APPLICATION

All applicants must complete the application form to be eligible for consideration.

DEADLINE

Applications for financial need scholarships to the 13th Annual Conference must be received by **March 19, 2018**. Applications will not be considered after this date.

Please return completed scholarship applications to erin@cpcal.com. Alternately, you may fax an application to 415-399-8390. You will receive a confirmation email. If you have not received a confirmation email within 2 business days, we have not received your application; please contact us at 415-399-8393.