

**Conference Scholarship Application
For California Rape Crisis Centers and
CALCASA Member Prevention Programs**



- Please read the Conference Scholarship Guidelines before you complete this form.
- Before applying for the scholarship, please consult your supervisor and/or Executive Director to determine the appropriate scholarship applicants for your agency.
- To be eligible for the scholarship, you must plan to attend the entire Statewide Pre-Conference Training Institute on August 30 – 31, 2010 and/or the entire National Sexual Assault Conference on September 1 – 3, 2010. No partial attendance at either event is allowed.
- Please **DO NOT REGISTER ONLINE** for the conference until you received the decision about your scholarship application from CALCASA. If you are awarded a scholarship, you will be given instructions on how to register.

Scholarships are awarded based on certain requirements and qualifications, as described in the Conference Scholarship Guidelines. Awards are issued in the form of a check reimbursement, not a cash advance. The amount of the scholarship is based on your estimated expenses to attend the conference. Please complete this form and return back by the deadline, June 30, 2010 by 5:00 p.m PST (Pacific Coast Time). Please note that two (2) scholarships per agency or grantee are awarded on a first-come, first-serve basis, so early submission of your application is encouraged. Based on funds available, partial scholarships may be awarded.

I) Applicant Information:

Applicant's Full-Name: _____

Name of Agency or Rape Prevention Program: _____

Name of your Executive Director or direct supervisor: _____

Contact Phone Number: _____ Fax Number: _____

Email address: _____

Reimbursement check made payable to: _____

Payment (reimbursement)
mailing address: _____

II) Please select which scholarship you are applying for that is available to your agency or RCC grant (only 2 scholarships available per agency or RCC grant):

- Scholarship 1: I am a staff or volunteer of a California Rape Crisis Center and/or a CALCASA member Rape Prevention Program.
- Scholarship 2 – focused on Underserved Communities: I meet the required or valued qualifications for this scholarship noted in the Scholarship Guidelines.

Applicants may be eligible for scholarships regardless of race, color, national origin, sex, sexual orientation, religion, disability or age.

Eligible Items for Scholarship Reimbursement

1. **Partial Scholarship for Registration Fee for the National Conference:** CALCASA's Board of Directors and Council have agreed to offer a one-time, partial scholarship of a maximum **\$150 per recipient** off the National conference registration fee to thank CALCASA members for their support. In order to access this registration scholarship, the agency **must** be a current 2010 CALCASA member. (Please contact Villena Koumis at Villena@calcasa.org, if you have not renewed your 2010 CALCASA membership).
2. **Travel Expenses:** We ask that participants find the most economical form of travel. *Attendance at all conference sessions is required in order to receive this scholarship.*
 - **Airfare or Train fare** (within California only) including baggage fees (2 bags maximum) not exceeding the airline's weight requirements;
 - **Hotel / Airport parking** (non-valet only);
 - **Airport shuttle or ground travel** to/from the hotel (no rental cars or fuel/gas costs allowed);
 - **Mileage at \$0.50 per mile:** Round trip mileage from office to conference site (Google map documentation will be required for verification purposes)
 - **Lodging at the California Government rate for \$110/night plus applicable taxes** (approximately \$20). Lodging is only available for attendees whose office is more than 50 miles from the conference site per California government guidelines.
 - **Per diem at a maximum of \$40 per day per state government guidelines** - receipts are **NOT** required for per diem. Per California government travel guidelines, no per diem costs are allowed if your travel time to the conference is less than 24 hours.

Items that are NOT Eligible for Reimbursements

- No rental cars or direct fuel/gasoline expenses are allowed.
- No sightseeing, recreational, or non-conference related travel expenses

PLEASE REMEMBER: Receipts are required for all expenses except for per diem costs.

****Full scholarships are not guaranteed. Partial scholarships may be awarded. Approved amounts awarded are non-negotiable.****

Please submit this scholarship application to Californiascholarships@calcasa.org or by fax at (916) 446-8166. **No scholarships will be accepted after the deadline of 5:00 pm PST (Pacific Coast Time) on June 30, 2010.** For questions regarding the scholarship, please contact the following:

Kavin Black	kavin@calcasa.org	916.446-2520 x305
Cindy Marroquin	cindy@calcasa.org	916.446-2520 x313

III) Estimated Conference Expenses

Applicant's Name _____

Name of Agency or Rape Prevention Program: _____

Travel Start Date and Time _____ Travel End Date and Time _____

Eligible Items for scholarship consideration	Estimated Total Cost	CALCASA Approved Amt.
a) \$150 discount off CALCASA Member Conference Registration for the National Sexual Assault Conference <ul style="list-style-type: none"> CALCASA Board of Directors approved this special one-time partial scholarship as a "thank you" to all <u>current 2010 CALCASA members</u>. Registration discount will be reimbursed following the conference. 		
b) Airfare /Train fare (within California only) - include baggage fees for maximum 2 bags <i>(Receipts required)</i>		
c) Hotel / Airport Parking: # of days _____ x \$ _____ /day <i>(Receipts required)</i> <ul style="list-style-type: none"> Self-parking at the Renaissance Hollywood Hotel is \$10.00 per day (no in and out privileges) 		
d) Airport Shuttle / Ground transportation (to and from hotel) <i>(Receipts required)</i> <ul style="list-style-type: none"> <u>To the Renaissance Hollywood Hotel:</u> <ul style="list-style-type: none"> Taxi from LAX, one-way, is approximately, \$45.00 Taxi from Burbank/Bob Hope Airport, one-way, is approximately \$25.00 Super Shuttle from either LAX or Burbank to hotel is approximately \$16.00 one way 		
e) Lodging: # of nights _____ x \$130/night <i>(\$110/nightly rate + approx. \$20/night in taxes and fees)</i> <ul style="list-style-type: none"> Rates at the Renaissance Hollywood Hotel are set at the California government rate of \$110/night plus applicable taxes and fees (approximately \$20/night). Receipts required Note: Lodging only available for attendees traveling more than 50 miles one way from their office. 		
f) Mileage (roundtrip): \$0.50 x # of miles _____ <ul style="list-style-type: none"> Attach a map printout-i.e. Google, MapQuest, etc.- to verify miles to and from your office) 		
g) Per diem at the California government rate: # of days _____ (No receipts required). <ul style="list-style-type: none"> Per diem is not allowed if travel time is less than 24 hours per state government guidelines. 		
Final Total Cost	Total Estimate	Total Approved

Signature Page

Recipient submission of Scholarship application:

Signature

Date

To Be Completed by CALCASA Staff:

Amount Requested: \$ _____

Amount Approved/Awarded: \$ _____

Scholarship Not Approved _____

CALCASA Staff Only: Review of Scholarship application

Signature

Date

Acceptance of Scholarship:

I understand that the scholarship amount of \$ _____ has been approved by CALCASA and is non-negotiable. I accept the scholarship based on the approved amount and understand/agree to all the terms noted in the scholarship guidelines. I also understand that my scholarship will be reimbursed by CALCASA based on my expense reimbursement forms submitted with the proper receipts to CALCASA by September 15, 2010, in order to be eligible for reimbursement.

Recipient **acceptance** of approved Scholarship
Amount by CALCASA

Signature

Date

Scholarship awarded amount is not valid until this form is received by CALCASA with appropriate and completed signatures. After review and signature, please return to CALCASA within 1 business day to complete processing of your scholarship award.

Non-Acceptance/Declining Scholarship Award:

I hereby decline the scholarship award.

Signature

Date