



DELAWARE COUNTY COMMUNITY SUPPORT PROGRAM
EVENT/TRAINING/WORKSHOP SCHOLARSHIP REQUEST

Please print, fill out the form, scan and email to: delcocsp@gmail.com Questions call DELCO CSP: 484.222.0719
*(*Incomplete application forms cannot be reviewed by the DELCO CSP Committee.)*
*(**All Scholarship Applications must be submitted 50 days prior to the Event/Training/Workshop date to allow time for DELCO CSP Committee review.)*

Applicant's name: _____ Application Date: _____

I would like to attend the following event/training/workshop as (circle which apply):

Facilitator Attending Presenter Assist with Training

Please give a brief description of the event/training/workshop, including dates and attach the event application, brochure or flier with this DELCO CSP Scholarship application to: delcocsp@gmail.com:

Relevance to goals and objectives of DELCO CSP:

Goals/Reasons for attending:

Will you be available to attend the following month's DELCO CSP Meeting to give a report regarding the outcome/benefits of your event/training/workshop (check which apply)? Yes: ____ No: ____ N/A: ____

Can you contribute a part of the cost for the event/training/workshop (check which apply)? Able: ____ N/A: ____
Amount able to apply towards event/training/workshop: \$ _____ N/A: _____

Cost of event/training/workshop

- Registration: \$ _____
- Travel: \$ _____
- Lodging: \$ _____
- Meals: \$ _____

Total Amount requesting: \$ _____

FOR DELCO CSP COMMITTEE REVIEW

Approved by CSP: _____ (see DELCO CSP Meeting Minutes) Not Approved: _____

Reason(s): _____

