TORS ASSOCIATION OF KENTUCRY	Code Administrators Association of Kentucky Application for CAAK MEMBER AWARD:					
SEIVIINAR ATTENDANCE GRANT						
AWARD AMOUNT IS \$250						
MEMBER NAME:				_ CAAK MEMBER #:		
	Last	First	MI			
WORK ADDRESS:						
Ν	lumber & Street		City	State	ZIP	
PHONE:()		E-MAIL ADDRESS:				
	are requesting assi	stance to attending fo	or this award:			
Seminar Name:	Seminar Name: Location:			Provider:		
Attendance at this seminar/conference will further my professional goals for the following reasons:						
Registration cost:	\$	Ti	avel cost: \$		_	
					c u	
		•	•	be unable to support full pove named employee to	-	
				ie above named employee		
	-	iference named above				
Title		Signatura		Data		
		Signature		Date		
seminar only as id award will eligible	dentified and my inte e, unless specifically		e course. If I fa K Board.	he award is to be applied il to attend the seminar, v knowledge.		
Applicant Name		Applicant signature		Date		
EMAIL COMPLETED APPLICATION TO:						
Pg 1 of 1 CAAK Scholarship Chair, James Allen						
Email: 211@prestonsburgfire.com						