



INTERNATIONAL CITY/COUNTY
MANAGEMENT ASSOCIATION
777 N Capitol St. NE, Ste. 500
Washington, DC 20002-4290
202.962.3680 | 202.962.3500 (f)
icma.org

Leadership ICMA Legacy Fund Grant Application

Overview

The Leadership ICMA Legacy Fund Grant is designed to help those who have been accepted into the Leadership ICMA program, but need financial assistance in order to continue in the program. The Financial Assistance may be required due to a change in job status, the financial condition/contribution of the agency sponsoring the participant, or a myriad of other factors. The Grant Fund is controlled by a Leadership ICMA Legacy Fund Grant Committee, which consists of Leadership ICMA graduates and ICMA Leadership Development Staff. The Scholarship was started as a legacy program by the 2010 Leadership ICMA Class. Applicants are eligible for up to \$3,000 of assistance over the two-year period.

Scholarship Eligibility

Applicants are eligible for financial assistance if:

- A change in job status occurs which makes participation in the program financial difficult
- Your sponsoring agency cannot continue to support your participation in the program
- A special circumstance professionally or personally which makes participation in the program financially unsustainable

Applicant Commitment

Applicants accepting grant funds agree to make their best efforts to repay the amount of the grant over the course of their city management careers. Grant recipients also agree to serve one two year term on the board if requested.

Contact

Please direct any questions to Felicia C. Logan, ICMA, Director of Leadership Development at:
flogan@icma.org, (202) 962-3626.

Applications should be mailed
to: Felicia C. Logan
Leadership ICMA
777 North Capitol Street,
NE Suite 500
Washington, DC 20002-4201

Leadership ICMA Legacy Fund Grant Application

Full Name: _____

Job Title: _____ Organization: _____

Office Mailing Address: _____

Office City/State/Zip: _____

Office Telephone: _____ Office Fax: _____

Office Email: _____

Home Mailing Address: _____

City/State/Zip: _____

Home Telephone: _____

Please contact me via: Mail Telephone Email At my: Office Home

With your permission, the Leadership ICMA Legacy Fund Grant Committee will receive a copy of you Leadership ICMA application materials.

Please check here to authorize the release of your application materials to the Leadership ICMA Legacy Fund Grant Committee.

I wish to apply for \$_____ in financial assistance for the Leadership ICMA program. (Applicants are limited to \$3,000 over a two-year period. Please request what you **need** to continue the program, as funds are limited and the Legacy Fund would like to support as many people as possible.)

Please describe why you need financial support to continue the Leadership ICMA program: (Attach additional sheets, if necessary).

Applicant's Commitment and Signature:

The information supplied above is correct to the best of my knowledge. If approved for funds, I hereby commit over the course of my city management career to providing funds equal to or greater than the amount of grant funds I receive from the Leadership ICMA Legacy Fund. I also commit to serve one two-year term on the Leadership ICMA Legacy Fund board, if requested to do so after completion of the program.

Signature

Date