The Apartment Association of Southern Colorado Scholarship Application

I am applying for the: CAM Scholarship CALP S	cholarship CAMT Scholarship
ELIGIBILITY	REQUIREMENTS
 Be employed by a member in good standing with AASC Have the proper industry experience as stated below: CALP - 6 months industry experience CAM - 2 year industry experience CAMT - 1 year industry experience 	 Be available to take the classes as scheduled. Submit this application in its entiretyno later than March 23, 2025 Meet all the designation requirements as stated by NAA.
Name:	
E-mail:	_Phone:
Management Company:	
Property Name:	
Supervisors Name:	Phone:

Return by March 23, 2025

To ensure full consideration, all application materials must be submitted as a single PDF document and include the following:

- A fully completed application (both pages).
- A 250-word statement explaining why you should be considered for the designation.
- A current resume.
- A professional letter of recommendation.



By E-mail To:Die codi@aaschq.org



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goals:		
How do you keep yourself informed of industry news, trends, and best practices?		
		_
Which AASC events have you Beat, Bags, & Brews	PAC Golf	t year? (check all that apply Installation
Bowling Tournament	PAC Event	Holiday Dinner
Golf Tournament	Trade Show	Silent Auction
Please list the education clas	sses you attended in th	e past year:
Did you serve on an AASC Comm	nittee in the past year?	YES (list below)N

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Scholarship Agree	ment
is true and correct to the best should I become a scholar understand that should I of	, do hereby agree that all of the information provided best of my knowledge. Additionally, I do hereby acknowledge that ship recipient, I am fully responsible for attendance at ALL classes. I default, The Apartment Association of Southern Colorado will require a ne scholarship amount by the end of the course.
Signature:	Date:
Scholarship A	Applicant Authorization Form
Association of Southern C that the individual apply considered as a possible applicant's Supervisor/Ma	applied for a CAM, CAMT, or CALP scholarship through The Apartment olorado. The authorization signature below serves as acknowledgmenting has completed and submitted all paper work necessary to be scholarship recipient. This also serves as authorization from the nager that if the applicant is selected as a scholarship recipient, time necessary to fulfill all obligations for the selected designation.
Supervisor's Name:	
Title:	Company:
Company	

This form is to be signed by applicant and his/her supervisor as part of the completed scholarship packet.

Signatures guarantee attendance if the applicant is chosen as a scholarship recipient.

Date: _

Supervisor's Signature:_

THANK YOU TO OUR SCHOLARSHIP CONTRIBUTOR:



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