



Board of Examiners
Ministry of Municipal Affairs and Housing
PO Box 9845 STN PROV GOVT
Victoria, BC V8W 9T2

BOARD OF EXAMINERS: SCHOLARSHIP APPLICANT INFORMATION UBCM COMMEMORATIVE SCHOLARSHIP PROGRAM AND JEFF MCKELVEY SCHOLARSHIP PROGRAM

UBCM COMMEMORATIVE SCHOLARSHIP

The purpose of this Scholarship program is to provide financial assistance to persons working in local government who are pursuing courses leading to certification from the Board of Examiners and who wish to upgrade their professional skills through enrolment in post-secondary courses of study and/or attendance at workshops or seminars relating to local government administration.

A. Eligibility

1. Persons employed by: a municipality, regional district, improvement district, the UBCM, the Municipal Finance Authority and persons employed by a First Nation with membership in the UBCM (see www.ubcm.ca/EN/main/about/ubcm-members.html for a listing of UBCM members) may submit an application for a Scholarship. Persons **MUST** be endorsed by their Council, Regional Board or Chief Administrative Officer. Employers may endorse up to three employees per year. The Board will review applications that exceed the 3 applicant limit at the last Board meeting before fiscal year end, and may make awards subject to available funding.

B. Applications

1. An application for a scholarship is to be submitted on the approved form to :

Board of Examiners
Ministry of Municipal Affairs and Housing
PO Box 9845, STN PROV GOVT
Victoria, BC V8W 9T2

E-mail: BCBoardofExaminers@gov.bc.ca

2. To be considered by the Board of Examiners, each application **MUST** be accompanied by a letter of endorsement from the Council, Regional Board or Chief Administrative Officer, currently employing the applicant.
3. An application for a Scholarship must be submitted prior to undertaking a course. Scholarships **will not be** awarded for courses already underway or completed. Scholarship applications for courses in the next fiscal year (beginning April 1), may be deferred for decision until the first Board meeting of the fiscal year in which the course is scheduled, or denied with a request to resubmit after March 31. It is recommended that applications for courses not in the current fiscal year be submitted on a separate application form after April 1.

C. Use of Award

1. The award may be used by the applicant to pay tuition and texts for any approved course of studies offered in or by any post-secondary educational institution or its equivalent, in British Columbia. There is no requirement to enroll in full year or semesters: e.g. three or six week courses or extended seminars may be considered by the Board. Out of province courses or seminars are not eligible for consideration.
2. Awards for courses of study will be considered only when the program is three days or longer in duration.
3. The award may stipulate the purposes and categories of expenses which may be paid to the recipient.

D. Value of Award

1. Full eligible costs may be awarded to a maximum of \$700.00 per individual per year, however the Board may exceed this amount if sufficient funds are available.
2. In addition to D(1) above, the Board will consider reimbursement for travel and related costs of courses where need is demonstrated to the Board.
3. Subject to availability of funds, individuals may apply for further funding if required.

E. Approval

1. The Board of Examiners will be responsible for determining or adjusting the amount of each award. Within the maximum amounts permissible, the Board may, at its discretion, make adjustments to the amount of any award to reflect the circumstances of the recipient.
2. The Board of Examiners may impose other conditions, as it considers appropriate, relative to the granting of any award.

JEFF MCKELVEY SCHOLARSHIP PROGRAM

The primary purpose of the Jeff McKelvey Scholarship Program is to provide financial assistance to persons working in local government who are pursuing any course of studies to upgrade their skills in the local government field.

A. Eligibility

1. Must be employed by a municipality or regional district
2. Must be endorsed by their Council, Regional Board, or Chief Administrative Officer
3. A municipality or regional district may endorse one employee only per year.

B. Application

An application for a scholarship must be submitted on the approved form to:

E-mail: BCBoardofExaminers@gov.bc.ca (preferred)

Or

Mail to:

Board of Examiners
Ministry of Municipal Affairs and Housing
PO Box 9845, STN PROV GOVT
Victoria, BC V8W 9T2

To be considered by the Board of Examiners, each application **MUST** be accompanied by a letter of endorsement from the Council, Regional Board, or Chief Administrative Officer, currently employing the applicant.

C. Use of Award

1. The award may be used by the applicant to pay tuition and texts for any approved course of studies offered in or by any post-secondary educational institution or its equivalent, inside or outside of British Columbia. There is no requirement to enroll in full year programs or semesters: e.g. three or six week courses or extended seminars may be considered by the Board.
2. Awards for courses of studies will be considered only when the program is three days or longer in duration.
3. The award may stipulate the purposes and categories of expenses which may be paid to the recipient: a) registration/tuition; and b) prescribed texts/materials at 50% of cost up to \$50 per course.

D. Value of Award

1. Full eligible costs may be awarded to a maximum of \$500 per individual per year.

E. Approval

1. Awards will be made only by the Board of Examiners. The Board may seek the advice of its partner organizations or other educational authorities.
2. Reimbursement will be made following the successful completion of the course(s) for which the award was granted. Proof of completion must be provided within a reasonable time period.
3. The Board of Examiners will be responsible for determining or adjusting the amount of each award. With the maximum amounts permissible, the Board may, at its discretion, make adjustments to the amount of any award to reflect the circumstances of the recipient.
4. The Board of Examiners may impose other conditions, as it considers appropriate, relative to the granting of any award.



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Board Website: www.gov.bc.ca/localgov-board-of-examiners

APPLICATION FOR A UBCM COMMEMORATIVE / JEFF MCKELVEY SCHOLARSHIP

Note: The information on this form is collected to administer the provisions of the *Local Government Act* (RSBC 1996 c. 323) and will be used to process your application. If you have any questions about the collection and use of the information e-mail the Administrator at BCBoardofExaminers@gov.bc.ca.

Applicant's Information

<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Miss.	
Last Name:	First Name:
Office E-mail Address:	
Current Employer:	Office Telephone Number:
Work Address:	Name of CAO:
City / Province:	Postal Code:
Current Position Title:	Length of Service in this Position:

B. Award Data

Amount of Award Requested (per course): \$		I am taking this/these course(s) for credit: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Institution Offering Course:	Course Title(s):	Date: MM/DD/YY	Tuition Fee	Texts (50% of actual)

Note: "Incidental" expenses, membership and registration fees, are not eligible.

Are you applying for travel/other assistance? If yes, APPENDIX 1 must be completed	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you applied for funding assistance from your employer? APPENDIX 2 must be completed	<input type="checkbox"/> Yes <input type="checkbox"/> No
Will you be receiving any assistance? APPENDIX 2 must be completed	<input type="checkbox"/> Yes <input type="checkbox"/> No

Describe your career expectations:

How will this course of studies relate to these expectations?

C. Declaration

I declare the above information to be correct and acknowledge that any Scholarship funds I receive are to be remitted to the local government.

Signature:

Date signed:

Note:

The Board reviews scholarship applications and makes awards for courses that commence in the current fiscal year only.

All applicants must provide:

- A letter of endorsement – see section B.2 of the Applicant Information Sheet
- APPENDIX 1, if applicable, and APPENDIX 2

Return one completed copy via email (preferred) to: BCBoardofExaminers@gov.bc.ca

or Mail to : Board of Examiners
Ministry of Municipal Affairs and Housing
PO Box 9845 STN PROV GOVT
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Note: Applicants need complete only one scholarship application as the Board will determine whether the source of funding is from the UBCM Commemorative Scholarship fund or the Jeff McKelvey Scholarship fund. Scholarship funding is available as follows.

UBCM Commemorative Scholarship

- MATI 1 funding is provided through MFA's Jim Craven Scholarship Fund.
- \$700 per course to assist with MATI course tuition costs for PADM 204, PADM 205, PADM 207, PADM 208, and PADM 308 participants who take the course for credit; long distance travel policies apply.
- \$350 per course to assist with MATI course tuition costs for PADM 204, PADM 205, PADM 207, PADM 208, and PADM 308 participants who take the course for non-credit; no travel costs awarded.
- Funding is not available for LGMA's School for Statutory Approving Officers non –credit course.
- All Universities and Colleges in BC taken for credit– \$400 for tuition assistance; long distance travel policies apply.
- \$350 to assist with tuition costs for non-credit courses offered by Universities and Colleges in BC; no travel costs awarded.

Jeff McKelvey Scholarship funding is available up to a maximum of \$500 per individual per year; no travel costs awarded.

APPENDIX 1

Request for Travel Assistance

The Board will consider requests for long-distance travel assistance on a demonstrated need basis. Assistance will only be considered for accommodation and car mileage or excursion rate airfare with the lowest amount being eligible for assistance.

A. Travel by Air

From _____ To _____

Airfare \$ _____

Travel by personal vehicle

From _____ To _____

Mileage _____ @ \$ _____/km

B. Accommodation

Hotel _____ City _____

How many nights? _____ Amount \$ _____/per night

C. Please provide your reasons for this travel request:

D. TOTAL AMOUNT OF REQUESTED TRAVEL \$

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Applicant signature

Date

APPENDIX 2

Scholarship Application – Funding Assistance from Employer

1. Complete if applicable:

Please list reasons why funding assistance has not been requested from your employer:

2. Complete if applicable:

Please list details of funding assistance from your employer:

Applicant Signature

Date