

Connect. Learn. Invest. Develop. Challenge.

Grow Yourself and Your Career FFDA ICCFA University Professional Development Scholarship Application

The Florida Funeral Directors Association is proud to sponsor a professional development scholarship providing funds for a member to attend the International Cemetery, Cremation and Funeral Association University. The ICCFA University is a 5-day intense training at six colleges:

- 21st Century Services
- Administration & Management
- Cremation Services
- Funeral Home Management
- Land Management & Grounds Operations
- Sales & Marketing

Please visit the ICCFA web site at www.ICCFA.com to learn more about the program. FFDA will pay all registration costs (up to \$1,750) for one association member to attend the ICCFAU. Employers and/or scholarship recipients are responsible for travel and hotel accommodations. Please fill out the attached application and return it to the FFDA office by May 15th. If you have questions, please call the FFDA office at 800/226-3332.



FFDA 2010 ICCFAU SCHOLARSHIP APPLICATION

A. Scholarship Questionnaire

Applicants should submit their typed answers on a separate sheet of paper, identifying each question by number and restate the question.

1. Why did you enter the funeral and/or cemetery profession?
2. Describe the responsibilities and duties of your current position.
3. List any community service or professional associations in which you are currently active and explain your participation.
4. What other continuing education courses have you taken in the past two years?
5. Describe your philosophy of customer service.
6. What are your long-range professional goals?
7. What areas of additional training are you looking to receive at the ICCFAU?

B. Requirements

1. All applicants must currently be a full-time employee of an FFDA member firm for at least one (1) year.
2. Applicants can hold any position within the funeral home and/or cemetery.
3. Applicants must submit the application information by May 15th to the FFDA office:
FFDA ICCFAU Scholarship Application, 325 John Knox Rd., L-103, Tallahassee, FL 32303

C. Personal Data

Name: _____ Home phone #: _____
Home address: _____
Firm: _____ E-mail: _____
Firm address: _____
Firm phone #: _____ Firm Fax #: _____
Current position: _____ Title: _____
Length of Employment: _____

Previous Employment

Employer: _____ Position: _____
Length of time employed: _____
Employer: _____ Position: _____
Length of time employed: _____
Employer: _____ Position: _____
Length of time employed: _____ Position: _____
Education (include current courses of study, if applicable)
School: _____
Location: _____ Completion date: _____
Course of study: _____
School: _____
Location: _____ Completion date: _____
Course of study: _____ Completion date: _____

D. Applicant Certification of Intent

Name: _____ Date: _____
I hereby certify that:
A. I have personally completed this FFDA ICCFAU Scholarship application and to the best of my knowledge, the information is correct and complete.
B. If awarded an FFDA ICCFAU Scholarship for the year, I understand that I will forfeit the scholarship if I am unable to attend.

APPLICANT'S SIGNATURE: _____

E. Employer Certification of Support

Name: _____ Date: _____
I hereby certify that:
A. As the applicant's employer, I support the applicant in applying for the FFDA ICCFAU Scholarship and will provide paid time off if applicant receives scholarship.
B. As the applicant's employer, I understand that the FFDA ICCFA Scholarship tuition will be fully funded, but that compensation, travel, hotel, food costs and other expenses will be the responsibility of the employer and/or employee.

EMPLOYER'S SIGNATURE: _____