

APIC Chicago

Subject: Certification Scholarship
Effective Date: March 2002
Approved by: The Chicago Metro APIC Board
Revision Date: May 2005

Purpose: To provide certification and re-certification by offering an annual scholarship for the certification fee.

Procedure:

1. If outside support is made available, APIC Chicago will pay the cost of certification for one current member.
2. Scholarship applicants must pay the certification fees from their personal account.
3. Scholarship applicants must submit a copy of the certification.
4. Scholarship applicants must be current members of APIC Chicago and in good standing (i.e. membership dues paid).
5. Applications must be postmarked no later than November 23rd of the year in which certification or re-certification will take place.
6. Applications will be submitted to current President or designee.
7. Winners will be selected by random drawing from a pool of applicants.
8. Winners will be announced at the Annual Business Meeting and in the first newsletter thereafter.

APIC Chicago

APPLICATION FOR CERTIFICATION SCHOLARSHIP AWARD

Date: _____

Name (last, first): _____

Healthcare Institution _____

Job Title: _____

Years of Certification: _____

Signature _____

Please attach a copy of the CBIC certificate and receipt for payment of certification.

Submit application form to current Chicago APIC President.