



MAADAC Scholarship Application (MAADAC Members Only)

(All scholarship applications must be received at least 45 days prior to scheduled date of training)

\_\_\_\_\_

Please list the training event you would like to attend: \_\_\_\_\_

Name: \_\_\_\_\_

Mailing Address: City, State, Zip \_\_\_\_\_

Daytime phone: \_\_\_\_\_ Email: \_\_\_\_\_

1. Please list the amount you are requesting; for what expenses; and the amount you/others will be contributing if any (registration, accommodation, travel etc.) ENCLOSE A COPY OF THE TRAINING FLYER/BROCHURE.

2. Please explain your expectations for this training event.

3. Is there any other information you'd like to share with us?

ALL SCHOLARSHIP FUNDS WILL BE PAID DIRECTLY TO THE APPLICANT UPON MAADC'S RECEIPT OF YOUR CERTIFICATE OF ATTENDANCE. IN OTHER WORDS, YOU NEED TO PAY UP FRONT AND WE WILL REIMBURSE YOU – IF APPROVED. APPROVAL WILL BE PRIOR TO THE EVENT, APPROXIMATELY 2-3 WEEKS AFTER REQUEST FOR SCHOLARSHIP. ONLINE TRAININGS WILL NOT BE CONSIDERED. TRAININGS NOT PRE-APPROVED BY MBSACC (CERTIFICATION BOARD) WILL NOT BE CONSIDERED. TRAININGS BY ADCARE EDUCATIONAL INSTITUTE ARE PRE-APPROVED. Approval will be considered for one training per calendar year. The maximum allowance per training is \$200.

Please return to: MAADAC, c/o Linda Mullis, PO Box 5761, Wakefield, RI 02880

Phone: 413-330-9828

Email: [cadaclm@cox.net](mailto:cadaclm@cox.net)

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_ Approved Amount: \_\_\_\_\_

Date Received Attendance Report: \_\_\_\_\_ Date sent check to individual: \_\_\_\_\_