



South Carolina Career Development Association

## 2021 NCDCA Conference Scholarship Award

*One-time award covering the cost of registration for the 2021 NCDCA Virtual Conference*

This award is given in honor of our SCCDA Past Presidents.

### Qualifications & Requirements

1. Must be an SCCDA member in good standing with the organization (i.e., Membership dues are paid.)
2. Have access and availability to attend the virtual conference June 29 – July 1, 2021
3. Complete and send this application to [ourscdda@gmail.com](mailto:ourscdda@gmail.com) by May 24 following instructions below
4. Preference will be given to current NCDCA members, but national membership is not required.
5. Awardee will be expected to present something learned from their attendance during the SCCDA Fall conference scheduled for November 3, 2021. They will collaborate with the SCCDA Professional Development Co-chairs to meet this requirement.

### Important Dates

Tuesday, May 4 – Application opens

Monday, May 24 @ 5 pm – Deadline to apply

Friday, May 28 – Notification of award

Monday, June 7 – Deadline for awardee's conference registration

***Tuesday, June 29 – Thursday, July 1 – [NCDCA Virtual Conference](#)***

### Instructions

Complete this application and submit to [ourscdda@gmail.com](mailto:ourscdda@gmail.com) by 5 pm on Monday, May 24, 2021.

Attach the completed application, and include your last name in the subject line:

"NCDCA Virtual Conf – [last name]".

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### Applicant Information

**First and Last Name:**

**Employer/Affiliation:**

**Job Title:**

**Email address:**

**Primary phone:**

**Current NCDCA Member:** Yes    No

### **Statement of Need**

Please describe in 500 words or less why you should be selected for this one-time conference scholarship award. Include points relevant to your work in career development. Explain how this award will help you overcome barriers you currently face in acquiring professional development opportunities. Identify at least two professional objectives attending this conference will help you achieve.

### **Attendance Commitment**

Submission of this application demonstrates a desire and commitment to attend the NCDA Virtual Conference from June 29 to July 1. If your employer requires supervisor approval to attend (i.e., to take leave or release time), please provide their name, email, and phone number below. If selected, they may be contacted by an SCCDA Executive Board member to verify your ability to attend. You are encouraged to review the cancellation policy for [NCDA](#) prior to submission.

Supervisor contact information:

**Applicant Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_