



OREGON VOLUNTEER FIREFIGHTERS ASSOCIATION

OVFA CONFERENCE SCHOLARSHIP FORM

“Representing Those Who Volunteer”

2019 Conference Scholarships Available

Scholarships will be for Tuition only and attendance at all functions to the OVFA Conference. Lodging, travel and meals outside of conference will be the responsibility of the registrant.

Requirements:

- ✓ Must be a member in good standing of a member department of the OVFA.
- ✓ Must include copy of conference registration with application.
- ✓ All applications must be received at the OVFA office: 1284 Court St. NE, Salem, OR 97301 prior to May 25, 2019.

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Daytime Phone: _____

Department: _____ Phone: _____

Department Address: _____

Your Rank/Title: _____ Years Experience: _____

Have you personally attended the OVFA Annual Conference? Yes No How many? _____

Has your department attended the OVFA Annual Conference? Yes No

Will your department pay your lodging expenses? Yes No

Briefly describe why you need financial assistance in order to attend the annual conference:

I certify that the information recorded on this application is correct. I further understand that OVFA is not authorized to provide medical, accident, or healthy insurance for applicants. If, for any reason, I am unable to attend this event, I will promptly return all money received from the fund. I understand that I am expected to participate in all aspects of the conference including business meetings, vendor night, and the banquet.

Signature of Applicant _____ Date _____

Signature of Fire Chief/Training Officer _____ Date _____