2022 SAIPAN CHAMBER OF COMMERCE



MEMBERSHIP PROFESSIONAL DEVELOPMENT SCHOLARSHIP

GUIDELINES

The Saipan Chamber of Commerce will award up to \$4000 (Up to Eight (8) awardees of \$500/per member company) in scholarship to Chamber Member Employers for workforce/job training, education, and leadership development. The business/organization must be an active Chamber Member. All applications must be completed to its entirety

Eligibility:

- Saipan Chamber of Commerce Members in good standing
- Must be a full-time employee (38 hours or more)
- Non-Executive position or role
- Applications must include (a) for reimbursement; training certificate and receipt or; (b) upcoming event must provide registration details

Purpose

- Workforce/job training, education, leadership development, re-tooling, etc.
- Accredited educational institutions that provide graded courses benefitting both employer/employee
- Continuing education courses that provide credit to maintain professional licenses and affiliations benefitting both employer/employee
- Non-credit and credit courses that are aimed at improving specific skills or employee's potential for advancement benefitting both employer/employee

Limitations

- One application per employee
- Members are limited to the number of voting representative given per member per category of membership, for submissions per.
- Company members may only win once

Procedures

- Once applicant submits application to <u>coordinator@saipanchamber.com</u>, applicant will receive a raffle number for their application
- Drawing will be conducted at the Saipan Chamber of Commerce December 2022 General Membership Meeting, applicants must be aware of their raffle number prior to drawing.
- Winning applicant must show raffle number sent via email by SCC Coordinator upon submission of application

Requirements

- 1. Completed Application
- 2. Proof of training/certification; completion thereof
- 3. Proof of receipt, registration

Submission Deadlines:

November 30, 2022 at 05:00 PM (CHsT)



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PROFESSIONAL DEVELOPMENT AWARD APPLICATION

Applicant Name:				
Employer Name:				
Employer Contact Person:				
Employer Phone:	Email:			
How long has the Applicant been emp	ployed by the Employer?			
Will this training result in a change in	position for the Applicant?	Yes or	No	
If Yes, Old Position	New Position			
Course/Training Name:				
Cost of Course/Training: \$				
Purpose of Taking Course:				
How does this course/training benefit	t your company?			
REMEMBER: You must include proof or registration with this application or it				
and employer.				
Applicant Signature:	Employer Sig	Employer Signature:		