



# Larry Heeb Professional Development Scholarship Application

KRPA Scholarship Association - 700 SW Jackson St Ste 805 - Topeka KS 66603-3737

I. Application for: Specify program, program sponsor, date and location: \_\_\_\_\_

Amount requested: \_\_\_\_\_

II. Personal (please print)

Name \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Employer \_\_\_\_\_

Employment Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (Daytime) \_\_\_\_\_ E-mail \_\_\_\_\_

III. Do you hold any of the following certifications?  AFO  APRP  CPRP  CPSI  CTRS  CYSA  Other (Specify)

Education

Name of College/University

\_\_\_\_\_ City \_\_\_\_\_ Degree received \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_ City \_\_\_\_\_ Degree received \_\_\_\_\_ Date \_\_\_\_\_

Current Financial Resources for Funding Professional Development

Self  full  partial  none

Employer  full  partial  none

Other (please specify) \_\_\_\_\_  full  partial  none

IV. Employment History (list current position first)

Employer Name	Address	Phone	Position	Employment Dates
_____	_____	_____	_____	_____

V. KRPA Involvement (List KRPA activities, workshops, and conferences you have attended)

\_\_\_\_\_  
\_\_\_\_\_

VI. Other Professional Involvement (List other activities, workshops and conferences you have attended)

\_\_\_\_\_  
\_\_\_\_\_

VII. Statement of Need:

Please attach a letter (maximum of one page) outlining your professional goals and how the Larry Heeb Professional Development Scholarship would assist you in achieving those goals. Please be as specific as possible.

\_\_\_\_\_  
*Electronic Signature*

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

*\*By typing your name in the electronic signature box, you indicate that this form is filled out to the best of your knowledge. Incomplete applications will be returned.*

Email Application to Erika Devore, [erika@krpa.org](mailto:erika@krpa.org).

**Reimbursement Process:** A typed summary and evaluation of the educational opportunity (no more than two pages), a copy of a signed CEU form and all receipts are due within 60 days of event and are required prior to reimbursement. The summary shall be submitted to the Scholarship Committee for review.