

Destination Marketing Association of the West  
DMA West Education and Research Foundation

**2018 Scholarship Program**  
**DMA West Tech Summit & Vendor Showcase**  
March 21-23, 2018 – Spokane, Washington  
(educational opportunity)

**SCHOLARSHIP APPLICATION**

1. Applicant \_\_\_\_\_  
Title \_\_\_\_\_  
DMO/CVB \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State/Province/ZIP \_\_\_\_\_  
Telephone \_\_\_\_\_ Fax \_\_\_\_\_  
E-mail \_\_\_\_\_

2. Number of years in the DMO industry: \_\_\_ yrs. • Number of years with current DMO: \_\_\_ yrs.

3. Brief job description (primary responsibilities)

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

4. Have you attended other DMA West educational programs? Yes \_\_\_ No \_\_\_  
If yes, please specify event and year.

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

5. How will attending the Tech Summit benefit **you** in your current DMO position?

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

6. How will this Tech Summit program benefit **your DMO**?

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

7. Will other staff members from your DMO be attending this Tech Summit?

Yes \_\_\_ No \_\_\_ If yes, please list names: \_\_\_\_\_

\_\_\_\_\_

▶ Application deadline: **February 1, 2018**. I understand the basis for the scholarship is financial need.  
I certify the above is true and correct and I agree to the conditions as outlined.

**Applicant Signature**

**CEO/Executive Director Signature**

\_\_\_\_\_

\_\_\_\_\_

Date \_\_\_\_\_

Date \_\_\_\_\_

Send completed application by **February 1, 2018**, to:

**DMA West Education and Research Foundation**, 950 Glenn Drive, Suite 150, Folsom, CA 95630  
Telephone (916) 443-9012 • Fax (916) 932-2209 • info@dmawest.org • Tax I.D. #68-0486847