



The Carolinas Club Foundation CCM Scholarship Application Guidelines

The Carolinas Club Foundation

The Carolinas Club Foundation (CCF), a non-profit charitable organization, was established by the Carolinas Chapter of the Club Managers Association of America (CMAA) in 2005 to raise funds to financially support the professional development of club managers through education, training and research initiatives. The purpose of this scholarship is to provide tuition support to club managers interested in pursuing the Certified Club Manager (CCM) designation.

Scholarship Awards

The Carolinas Club Foundation will award two (2) scholarships this year, based on the availability of funds and merit of applications. In order to help recipients meet certification requirements and prepare them for the CCM exam, each scholarship will fund \$4,000 to be applied toward registration costs and reimbursable expenses directly related to travel, lodging, etc. for one of the following programs:

- BMI Club Management
- BMI Leadership Principles
- BMI General Manager/COO
- BMI Tactical Leadership
- BMI Strategic Leadership
- BMI Food & Beverage Management
- BMI Sports & Recreation Management
- BMI Golf Management
- BMI Wine & Food Experience
- BMI International
- Joe Perdue Certification Review Course
- World Conference

The scholarships will be granted based on recommendations made by the Carolinas Club Foundation Scholarship Committee and approved by the Carolinas Club Foundation Board of Directors.

Who Should Apply?

Any CMAA member who is dedicated to attaining the CCM designation is invited to apply for the scholarship. Candidates must be a Professional or Alumnus member of CMAA and actively pursuing the CCM designation.

Application Requirements

To apply for the Carolinas Club Foundation CCM Scholarship, you must do all of the following:

1. Complete the application in its entirety.
2. Write an essay (between 750-1,250 words) addressing the following components:
 - a. Describe in detail your career objectives and goals within CMAA.
 - b. The reason(s) you wish to pursue your CCM designation.
 - c. Your specific interests within the private club management field.
3. Include a copy of your current résumé.
4. Include a credit history report from CMAA National.
5. Include two letters of recommendation from any two of the following individuals: General Manager (if in an Assistant Manager position), Club President, Club Board Member/Officer, Club Member.
6. Submit the application to kate@carolinascmaa.org by **August 31, 2023**.

Please Note: The application, essay and other required attachments must be typed. Any application that does not meet all the requirements listed above will not be considered.

Application Restrictions

- Receiving the scholarship does not in any way guarantee the awarding of the CCM designation.
- The scholarship only applies to programs/courses not yet taken.
- **The scholarship must be used within two years.**



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** The application, essay, and other required attachments must be typed to be considered. **

PERSONAL INFORMATION

Name: _____ CMAA Member #: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ E-mail: _____

CMAA Join Date: _____

EMPLOYMENT INFORMATION

Current Employer: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

Title: _____ Number of years at club: _____

Supervisor's Name: _____ Title: _____

Previous Employer: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

Title: _____ Number of years at club: _____

Supervisor's Name: _____ Title: _____

Total number of years in management/supervisory position(s) in a private club: _____

EDUCATION INFORMATION

Name of Institution/Location	Number of Years Completed	Degree Earned?	Major/Field of Study
	1 2 3 4 (Highlight Selection)	Y N (Highlight Selection)	
	1 2 3 4 (Highlight Selection)	Y N (Highlight Selection)	

HOSPITALITY/CLUB MANAGEMENT/CMAA INFORMATION

List any CMAA activities in which you are/have been an active participant (i.e. Chapter activities, education programs/workshops, conferences, etc.).

COMMUNITY INVOLVEMENT INFORMATION

List any community activities in which you are/have been an active participant.

EDUCATION BUDGET INFORMATION

What is your club's total budget allocation for education and how do you personally benefit from that allocation?

ESSAY

Please attach a 750-1,250 word essay, in which you address the following areas:

1. Describe in detail your career objectives and goals within CMAA.
2. The reason(s) you wish to pursue your CCM designation.
3. Your specific interests within the private club management field.

PLEASE SUBMIT THIS APPLICATION AND ALL REQUIRED ATTACHMENTS TO THE CAROLINAS CLUB FOUNDATION BY AUGUST 31, 2023.

Applicant's Signature: _____ Date: _____



The Carolinas Club Foundation Recommendation Form

Dear Recommender,

The candidate named below is applying for a Carolinas Club Foundation (CCF) scholarship and is seeking your recommendation as required by the CCF's program criteria. Please type your recommendation letter and submit it and this Recommendation Form to the CCF by **August 31, 2023**. **Please note that we do not consider applications complete unless we receive the appropriate recommendation letter and form by the deadline date.** Your prompt response is greatly appreciated.

The content of the letter is left to your discretion, but must address the following questions:

1. How long and under what circumstances have you known the candidate?
2. Why are you recommending the candidate?
3. How well does the candidate perform his or her job functions?
4. What is his or her potential for advancement in the club management field?

CANDIDATE SECTION

Candidate's Name: _____

___ I have waived my right to see this recommendation.

___ I have not waived my right to see this recommendation.

Candidate's Signature: _____

(Failure to sign the above indicates that the candidate has not waived his or her right to see this recommendation.)

RECOMMENDER SECTION

Recommender's Name: _____

Club Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Recommender's Signature: _____

IF THE CANDIDATE HAS WAIVED HIS OR HER RIGHT TO SEE THIS RECOMMENDATION,
PLEASE SUBMIT THIS FORM AND RECOMMENDATION LETTER TO:

kate@carolinasmaa.org



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CANDIDATE SECTION

Candidate's Name: _____

___ I have waived my right to see this recommendation.

___ I have not waived my right to see this recommendation.

Candidate's Signature: _____

(Failure to sign the above indicates that the candidate has not waived his or her right to see this recommendation.)

RECOMMENDER SECTION

Recommender's Name: _____

Club Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Recommender's Signature: _____

IF THE CANDIDATE HAS WAIVED HIS OR HER RIGHT TO SEE THIS RECOMMENDATION,
PLEASE SUBMIT THIS FORM AND RECOMMENDATION LETTER TO:

ELECTRONICALLY TO kate@carolinascmaa.org