SCCFA Scholarship Application

A. Scholarship Questionnaire

Submit all answers on a separate sheet of paper. Answers must be typed and double spaced. Identify each question below by number, and repeat the question prior to answering. Do not write you name on the answer sheet. Each answer sheet will be given a number before being submitted to the Scholarship Committee to keep the identities anonymous.

- 1. Why did you enter the cemetery or funeral industry?
- 2. Describe the duties and responsibilities of your current position.
- 3. List any community service or professional associations in which you are currently active and explain your participation.
- 4. What continuing education courses have you taken in the past year?
- 5. Describe your philosophy of customer service.
- 6. What are your long-range professional goals?

B. Personal	l Data		
		phone# ()	
Home	eAddress:		
Member			
Addre	ess:		
Firm		Length of employment	
E-Ma	il address	Title	
Previous	Employment:		
		Telephone	
	ddress		
Po	osition	Length of employment	
 Employer 		Telephone	
Ad	ddress	·	
Po	osition	Length of employment	
• S L	Schoolocation	Completion Date	
C	course of Study	Completion Date	
	ion of Intent		
I here	by certify that:		
A.		ation and Funeral Association Scholarship application has bee f, and to the best of my knowledge, the information contained	
B.	If awarded the SCCFA Scholarship. I am able to attend the ICCFA University program at the Fogelman Conference Center in July in Memphis, TN and am still employed by the sponsoring member firm on that date, or I will forfeit the scholarship.		
IGNATURE			
	Please return	n completed application to:	
SCCE		, GA 30068 or email to sccfa.office@gmail.com	