



## The Golden State Chapter, CMAA, Inc. Foundation

### CCM Certification Support Program

#### **Award/Purpose:**

To support active TGSC members who lack sufficient financial resources to fully fund designated professional development and/or career advancement opportunities leading to CCM Certification. This award is specifically designed to provide tuition reimbursement and up to \$1,000 for related expenses for travel and lodging. Applications must be submitted and approved in advance of participating in the intended program in order to receive any GSC Foundation funds. Reimbursement will be made AFTER proof of successful completion has been received by GSC Foundation. **Please note that not all applications will be funded and that you may only apply for any specific program one time.**

#### **Process Steps:**

1. Make application for the reimbursement award through the "CCM Certification Support Application." (below) This may be done at any time prior to participating in intended program. GSC Foundation will review.
2. You will be notified of GSC Foundation's decision within 30 days of receipt of your application.
3. Within 30 days of the activity, Post Education Activity follow-up information to include proof of successful completion and receipts to substantiate the request for payment.
4. Within 30 days of receipt and approval by GSC Foundation, a check will be sent to the person/club listed on the application for reimbursement.

#### **Who May Apply?**

TGSC members with an "Active" status in The Golden State Chapter of CMAA, who are in good standing and are working toward CCM certification.

#### **Application Requirements:**

CCM Certification Support Application Form submitted. Educational activity selection and endorsement of the Club General Manager and President (if the applicant is the General Manager) must be included. Each active TGSC member may apply for financial support of one educational activity per calendar year.

#### **Information/Questions/Inquiries Should be Directed To:**

The Golden State Chapter Foundation  
c/o Joshua Tanner, CCM, CCE  
73-735 Irontree Drive  
Palm Desert, CA 92260-6999

Telephone: 760-766-1090

Email: [jtanner@ironwoodcountryclub.com](mailto:jtanner@ironwoodcountryclub.com)

**Attn: CCM Certification Support Program**



## The Golden State Chapter, CMAA, Inc. Foundation CCM Certification Support Application

Education Venue: BMI Club Leadership \_\_\_\_ BMI Leadership Principles \_\_\_\_  
BMI General Manager/Chief Operating Officer \_\_\_\_ BMI Golf Management \_\_\_\_ BMI Food and  
Beverage \_\_\_\_ CMAA World Conference \_\_\_\_ CCM Review Course \_\_\_\_ TGSC Conference \_\_\_\_

Name \_\_\_\_\_ Date \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_

Club Name \_\_\_\_\_ Club Location \_\_\_\_\_

Job Title \_\_\_\_\_ CMAA Member # \_\_\_\_\_ Date joined CMAA \_\_\_\_\_

Location of Program \_\_\_\_\_ Start Date \_\_\_\_\_ End Date \_\_\_\_\_

**What are the Personal Development / Career Advancement Benefits of this program for you?**

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**Requested Reimbursement\* from GSCF for Tuition \$\_\_\_\_\_ Travel/Lodging \$\_\_\_\_\_**

\* (Reimbursement is provided after proof of successful completion of requested program and all paid receipts are provided; \$1000 maximum for Travel/Lodging Expenses; only 1 request per member per year)

**Amount/ Source of other funding      Club/Personal \$\_\_\_\_\_**

**The reimbursement check should be made payable to: \_\_\_\_\_**

**Address for reimbursement check: \_\_\_\_\_**

**Will you attend this program if GSCF does not approve funds for you? Yes/ Not at this time**

**List all CMAA programs required for CCM Certification that you have yet to complete:**

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**What is your current target date to achieve your CCM? \_\_\_\_\_**

**Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_**

**GM Endorsement: I enthusiastically support this employee's request for funding for this educational program as part of their CCM certification process.**

**GM Signature: \_\_\_\_\_ Date: \_\_\_\_\_**

**Club President Endorsement (If request is for the Club General Manager)**

Print Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

**The GSCF Scholarship Committee Chair: I have thoroughly reviewed this candidate's application and qualifications and fully endorse funding their request as presented.**

Signature \_\_\_\_\_ Date \_\_\_\_\_

GSCF Board Signature \_\_\_\_\_ Approved \_\_\_\_\_ Date \_\_\_\_\_

Not Approved \_\_\_\_\_ Date \_\_\_\_\_