

IMCOM Europe CYS Scholarship Application

Due to Region (urope CYS Scholarship A Alexa Simmons not later than	
	chnology in the Classroo		04-17 Feb 2019
Name:		Installation:	
PCS Date: Date or N/A		DOH:	
Facility:		Program Director:	
Position:		Position Grade	:
Email:			
Employee's S	tandard NAFI Number:		
I have read, understand, and agree to the terms outlined in the IMCOM Europe Child & Youth Services (CYS) Employee Scholarships for Undergraduate College Courses SOP.			
	•	urope.armymwr.com/scholarshipc	
I understand if I terminate course enrollment on or after class start date or receive a grade lower than a "C" that I am indebted to CYS for the cost of the scholarship and I am responsible to repay CYS all scholarship costs. Cost may be prorated depending upon drop date.			
Employee Signa	ature		Date
I certify this employee is current on CYS training.			
Training Specia	list Signature		Date
I certify this em time.	ployee has demonstrated	atisfactory performance and is	not under disciplinary action at this
Program Direct	or Signature		Date
Garrison CYS Coordinator: If candidate is not direct care staff, please include a justification why they should be considered for the Scholarship Program.			
I approve of this candidate participating in the CYS Employee Scholarship Program			
Garrison CYS C	coordinator Signature		Date
I approve of this candidate participating in the CYS Employee Scholarship Program.			
IMCOM Europe	cve		