

# Basic Economic Development Course (IEDC ACCREDITED) Scholarship Application



## In Honor of Truman H. Safford

Applicant must have completed at least six months of economic development work and must be a member of SCEDA; must be a resident of and work in South Carolina; must be willing to and successfully complete course if selected. Course must be accredited by the International Economic Development Council (IEDC). SCEDA will pay up to \$1,200.00 for registration, transportation, lodging, and meals while attending this Basic Program. Scholarship must be used within one (1) year of award.

**Please submit by March 1, 2022**

### PERSONAL INFORMATION

Name: \_\_\_\_\_ Nickname: \_\_\_\_\_

Company: \_\_\_\_\_

Title: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_

Are you a current member of SCEDA? \_\_\_\_\_ Date Joined: \_\_\_\_\_

List active memberships in economic development organizations: \_\_\_\_\_

\_\_\_\_\_

List memberships in other professional or civic organizations: \_\_\_\_\_

\_\_\_\_\_

Please indicate reason for need of scholarship: \_\_\_\_\_

\_\_\_\_\_

### INFORMATION ABOUT CURRENT POSITION (complete form below and attach resume for more detailed information)

Description of Present Duties: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What percentage of your time during the last year spent in economic development activity? \_\_\_\_\_

Number of years employed in economic development work? \_\_\_\_\_

**EMPLOYMENT RECORD**

*(please list last three positions held)*

Dates

Title or Position

Company

City, State

Industry Type

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**EDUCATION INFORMATION**

*(please attach additional sheets for more information if needed)*

College (undergraduate)

Degree

Years Attended

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Graduate or Special Schools

Degree

Years Attended

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Professional Honors and Achievements : \_\_\_\_\_  
\_\_\_\_\_

What benefits do you hope to derive from attending BEDC? \_\_\_\_\_  
\_\_\_\_\_

I commit to completing the BEDC Course    \_\_\_\_\_ Yes    \_\_\_\_\_ No

Signature (Applicant): \_\_\_\_\_ Date: \_\_\_\_\_

**IMPORTANT INFORMATION:**

- Submit scholarship application and all supporting documents in one PDF with the file name of “your name - BEDC Scholarship Application 2022” to arawl@sceda.org.
- SCEDA Scholarship Committee along with the SCEDA Board will make annual determination for continued eligibility.
- Recipient must attend BEDC within a year of being awarded the scholarship.

**SCHOLARSHIP APPLICATION DEADLINE:**

**MARCH 1, 2022**

Questions: Please call (803)929-0305.

Incomplete applications will not be considered.

