



PROFESSIONAL COMMUNITY ASSOCIATION MANAGER SCHOLARSHIP PROGRAM

As part of Community Associations Institute-Greater Los Angeles Chapter's commitment to foster vibrant, responsive, competent community associations, the Chapter is pleased to present the Professional Community Association Manager (PCAM) Scholarship Program. This program is designed to assist Chapter community manager members in their pursuit of the ultimate in management designations...the PCAM®

This program will be ongoing and will provide reimbursement for Professional Management Development Program (PMDP) coursework toward the PCAM designation. No reimbursement will be awarded for courses to be applied toward recertification.

- **Beginning in 2024 25% rebate of the course registration fee** will be awarded after an **online 200-level course is completed** and evidence is provided showing proof of attendance and a passing grade.

M-200 Series Course Rebate – The following criteria must be submitted for the rebate.

1. Completed Application Form
2. Copy of the registration fees paid to CAI-National
3. Copy of the passing grade or certificate from CAI-National

Program Details

Prerequisites:

The applicant must:

1. Be a Manager Member in good standing of the CAI-Greater Los Angeles Chapter.
2. Have taken and passed the M-100 course or have a CMCA certification.
3. Have worked as a community manager for at least one year.
4. Be currently employed as a community association manager.
5. Have attended two (2) CAI-GLAC educational luncheons within the previous 12 months.

Application:

1. Application form must be completed in its entirety and accompanied by proof of successful completion with passing grade and receipt of amount paid for the course.
2. All application materials are to be submitted to the Education Committee through the Chapter Office at 1010 N. Central Ave. #316, Glendale CA 91202 within 90 days of course completion.



CAI-GLAC PCAM SCHOLARSHIP APPLICATION FORM

Date _____ CAI Membership Number _____

Name _____

Address _____

Phone _____ Fax _____

E-Mail Address _____

Employer _____

Course(s) for Which Requesting Reimbursement:

1. _____ Date _____

2. _____ Date _____

CAI-GLAC Educational Luncheons Attended:

1. _____ Date _____

2. _____ Date _____

Documentation attached:

____ Verification of course attended

____ Verification of passing grade on course attended

I certify that the above information is current and accurate.

Signature _____

CAI-GLAC Chapter Office Use Only:

Documentation verified: _____ Reimbursement Awarded _____ Date Reimbursement Sent _____