

Date





Due to Region CYS Office Ruth Ploeger and Alexa Simmons not later than 05 Sep 2018 Term Dates: CDEC 1172 Mentoring for Early Childhood Educators 15-28 Oct 2018 Name: Installation: PCS Date: DOH: Date or N/A Program Facility: Director: Position Grade: Position: Email: **Employee's Standard 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. SOP available on MWR scholarship website. Europe.armymwr.com/scholarshipcyss 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 Signature** Date I certify this employee is current on CYS training. **Training Specialist Signature** Date I certify this employee has demonstrated satisfactory performance and is not under disciplinary action at this time. **Program Director 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 Coordinator Signature** Date I approve of this candidate participating in the CYS Employee Scholarship Program. **IMCOM Europe CYS**

Approving Official Signature