



THE HON. DUTCH MAGILL SCHOLARSHIP AWARD APPLICATION

New York State Magistrates Association

The Annual Conference of the New York State Magistrates Association provides access to excellent training as well as opportunity to interact with Justices from across New York State. NYSMA wants to encourage this access to interactive training with other Justices. For this reason, NYSMA is offering scholarship packages to attend the Annual Fall Conference of this Association.

Interested applicants must be a town or village justice of a court within New York State and financially unable to attend the Annual Conference by virtue of the lack of municipal funding. Only one applicant per Court may apply. The applicant must be a member in good standing of this Association. Although preference will be given to first-time attendees, all are encouraged to apply.

The application should be completed and signed by the applicant, along with all required attachments**, and forwarded to the Scholarship Committee for review. Only complete applications will be considered. The successful applicant(s) will be notified by the Scholarship Committee prior to the Annual Fall Conference.

Each scholarship award will cover the cost of lodging and meals for one person to attend the conference up to \$500 and require the recipient to attend the Annual Business Meeting and apply for OCA's reimbursement of one night lodging, mileage and certain applicable meals. The Scholarship Committee reserves the right to disregard any incomplete application without prior notice to the applicant. The decision of the Scholarship Committee and the NYSMA Board of Directors will be considered final and will not be subject to any review or appeal process. In keeping with the mission of our organization, we offer this scholarship to further the education of town and village justices throughout the State of New York.

PLEASE READ AND COMPLETE THE APPLICATION

1. Name: _____
2. Address: _____
3. Title _____ Phone: _____ Email: _____
4. Town/Village of: _____
5. County of _____ Length of Service: _____
6. Member of NYSMA Yes No Member of your County Association Yes No
7. Have you attended any prior conferences: Yes No
If yes, do you remember when and where? _____
8. What position has your municipality taken with respect to your attendance at training sessions: _____

*****In order to have a complete application, you will need to attach:***

- a brief application letter supporting your request for financial assistance; and
- a letter from the Chief Fiscal Officer of your municipality or a copy of your Court's budget to verify lack of municipal funding

Please sign and date the application and submit all documents prior to August 12th, 2022 to:

Scholarship Committee, NYSMA, 163 Delaware Avenue, Delmar, NY 12054; or scan and email documents to:
nysma1@gmail.com

Dated this _____ day of _____ 20 _____

Applicant's Signature