

Behavioral Health Board – Region 3

Serving Adams, Canyon, Gem, Owyhee, Payette and Washington Counties

ICADD SCHOLARSHIP APPLICATION 2020

Name:		Employer:		
Street Address:				
City:	State: _	Zip:		
Email address:				
Cell #		Work #		
Current License or Certification	n (if applicable	e):		
Are you from Region 3? Yes	No	those who are from	Region 3 v	vill have preference
Which county? (Adams, Canyo	n, Gem, Owy	hee, Payette or Wash	ington):	
 Have you previously attended If so, when did you attend? 			Yes	No
Please describe in 250 words of ICADD Conference to your wo attach a separate document.				

Note: If awarded a scholarship and you have already registered/paid, you will be reimbursed the registration fee shown/paid on your receipt up to the maximum amount of \$150.00 within 30 days' post conference. Awardees will be decided no later than August 14th, 2020.