

Virginia Chapter National Emergency Number Association George Thomas Memorial ENP Scholarship APPLICATION FORM



Purpose of ENP Certification

Certification is a tool of a professional association to establish the benchmarks of performance that will signify a broad-based competence in the professional field. By successfully completing the ENP Certification Program, you will:

- Demonstrate a mastery of the comprehensive knowledge base required for emergency number program management.
- Help to raise industry standards and increase the respect and prestige of those involved in 9-1-1.
- Confirm your commitment to the 9-1-1 profession by showing yourself to be a leader in public safety and pledging yourself to stay aware of current issues and developments in the field.

Purpose of Virginia NENA ENP Scholarship

- To assist Virginia 9-1-1 professionals in reaching a higher level of knowledge of 9-1-1 and advancement in 9-1-1 leadership.
- To provide financial assistance to Virginia 9-1-1 professionals who might otherwise be unable to pursue ENP certification.

Criteria

- The applicant must meet the ENP Certification Exam requirements as established by the NENA Institute Board.
- Applicants must be employed on a full-time basis by a public safety agency, 9-1-1 administrative organization, or official 9-1-1 board.
- Applicant must not have received any other monetary assistance from their employer or 9-1-1 grant/scholarship programs.
- Applicant must receive the endorsement of his/her supervisor/agency.

Responsibilities of Scholarship Recipients

- Scholarship applicants must be able to sit for the exam testing within one year of submitting the application.
- Scholarship applicants must submit proof of payment for sitting for the exam. Virginia NENA will only award scholarships for the initial examination fees.
- Scholarship applicants must submit proof of successfully passing the exam by submitting a copy of the NENA Institute letter confirming certification.
- In the event that the recipient does not pass the initial exam, recipient understands that he or she will be responsible for cost of re-examination.

Return completed form to:

Virginia Chapter of NENA Executive Board scholarships@virginia-nena.org

Last Name:	
First Name:	
Position/Title:	
Agency Name:	
Address:	
City:	Zip Code:
Phone:	Fax:
Email:	
Number of years in public safety:	
Number of years in current position:	
Briefly describe your current responsibilities.	
Describe how the scholarship will assist you as a 9-1-1 professional.	
I hereby make application to Virginia Chapter of NENA for the ENP Scholarship based on the inability of my agency or county to pay the cost associated with taking the Emergency Number Professional exam.	
I understand that the basis for the scholarship is financial need and this application does not imply Virginia NENA will reimburse me for the any examination costs. Further, I understand the Virginia Chapter of NENA ENP Scholarship will only reimburse the NENA Member cost of \$395.00. Any cost associated with travel, meals and/or incidentals are the responsibility of the recipient.	
Applicant Signature:	
Supervisor Signature:	
Date:	