

# COCM

## Educational Program Scholarship Application

### **Instructor/Applicant Information:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

E-mail: \_\_\_\_\_ Phone: \_\_\_\_\_

### **Program Information:**

Please attach a copy of curriculum or teaching outline to the application.

Program Name: \_\_\_\_\_

Program Purpose and objective: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Provide the basis, code or standard used for the development of the program: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Identify the category/ies this program is designed to meet:

- Administration – program designed to enhance an inspector’s understanding of laws, rules and the administration and enforcement of related statutes and regulations.
- Communication – program deigned to enhance an inspector’s communication skills with the publics an may include technical writing, public speaking, working with people.
- Specialty – Programs deigned to increase an inspector’s knowledge of inspection and construction techniques.
- Technical – Program designed to discuss technical code provisions.
- Plan Review – Programs deigned to enhance and inspectors knowledge of examining construction documents to determine compliance with applicable codes.

Contact Hours: Provide the number of full contact hours required to conduct the program. \_\_\_\_\_ Credit Hrs

### **Submittal of Application:**

Submit completed application to COCM via mail or email:

COCM  
PO Box 1101  
Benton Harbor, MI. 49023

cocm1@yahoo.com