

## 2024 Karl G. Habib Honorary Wine Scholarship Application

GENERAL INFORMATION					
Name:		CCM	CCE M	ICM	
Address:					
City/State/Zip:					
Phone:	Fax:				
E-mail:					
Chapter:		Number of years	in a management posit	ion:	
EMPLOYMENT INFORMATION					
Current Employer:					
Address:					
City/State/Zip:					
Phone:					
Title:	Number of years at club:				
Previous Employer:					
Address:					
City/State/Zip:					
Phone:	Fax:				
Titlo	Number of years at club:				
Supervisor's Name:		Title:			
*			E		
EDUCATION INFORMATION					
Name of Institution/Location	Number of Years Completed	s Degree Earned		of	
	□1 □2 □3	□4 □Y □	□N		
	□1 □2 □3	□4 □Y [	□N		

CWAA ACTIVITIES	
List any CMAA activities in which you are/have been an active participant (i.e. chapter active education programs/workshops and Conferences).	vities,
COMMUNITY ACTIVITIES	
List any community activities in which you are/have been an active participant.	
EDUCATION BUDGET	
What is your club's total budget allocation for education and how do you personally benefit allocation?	from that
ESSAY	
Please attach a 500 – 1,000 word essay in which you address the following areas:	
<ol> <li>Describe in detail your career objectives and goals.</li> <li>Detail the reason(s) you wish to pursue your professional development in the area of What are your specific interests within the private club management field?</li> </ol>	of wine.
Please email this application and all required attachments no later than <b>Tuesday</b> , <b>October 1</b> , <b>2024 to jkuntar@mgccgolf.us.com</b>	
Applicant Signature Date	