

# North Carolina CCIM Chapter Robert M. Lewis CCIM Named Endowed Scholarship

Scholarship covers up to \$1,000 in Class Cost

Must be used on a North Carolina Cl Class in the year that the scholarship was issued.

Check will be dispersed upon completion of the class.

**Due Date: June 10, 2024** 

## Named Endowed Scholarship Program Application

The CCIM Robert M. Lewis, CCIM Scholarship honors Robert Lewis, CCIM as a key member and past president of the North Carolina CCIM Chapter. The CCIM Robert M. Lewis, CCIM scholarship was created in 2013 by the NC-CCIM Chapter with matching funds provided by the CCIM Foundation. Named endowed scholarships honor those who have shown great dedication, commitment, outstanding achievement and service to the commercial real estate industry.

### **About the North Carolina Chapter**

The North Carolina CCIM Chapter is a 501(c)(3) non-profit organization. The North Carolina Chapter of CCIM promotes the image and reputation of the Institute and its CCIM designee members, giving assistance and guidance to candidates seeking to become designees, and providing opportunities for participation in an ongoing program of real estate education. NC-CCIM strives to support the education program of the Institute by conducting approved real estate courses and seminars for the chapter, local boards of REALTORS®, the state association of REALTORS®, and members of the public within the chapter's jurisdiction. NC-CCIM also assists the Institute in achieving its purposes and objectives by providing market feedback, course promotion, public relations, and membership recruitment and retention programs, as well as a forum for the exchange of information and business development.

#### **About the CCIM Foundation**

The CCIM Foundation is a 501(c)(3) non-profit organization. The Mission of the CCIM Foundation is to advance and foster commercial real estate education through scholarships, programs and initiatives.

(To be completed by scholarship applicant and submitted to chapter)

Date Submitted:	Chapter: _	 	
Applicant's Name:			
Company:			
Work Address:			
City/State/Zip		 	
Work Phone Number:			
Home Address:		 	
City/State/Zip		 	
How many years have you			

NC-CCIM 23 Oak Branch Drive Greensboro, NC 27407

Phone: 336-854-5868 Fax: 336-292-5416 Email: pstroud@nc-ccim.org

Are you already enrolled in the course?	Ye	s No
Have you taken CI Intro?	Ye	s No
Do you plan to obtain the CCIM designation?	Ye	s No
What other CCIM CI Classes have you taken? (I	Please Circle) CI 101	CI 102 CI 103 CI 104
Please include the following with this application:  1. Current Resume 2. Three professional references 3. Typed letter which includes answers to the following want to become a CCIN What are your contributing achieven What are your career goals?  Would you take the course even if the	1? nents to your company a	
<b>References</b> Provide three professional references.		
Name:	Position/Relationship: _	
Address:		
Phone Number:		
Length of time you have known this person:		
Name:	Position/Relationship: _	
Address:		
Phone Number:		
Length of time you have known this person:		
Name:	Position/Relationship: _	
Address:		
Phone Number:		
Length of time you have known this person:		
By submitting this application, I agree that in the event I a Foundation and/or CCIM Institute and Chapters may use r promotional materials.		

NC-CCIM 23 Oak Branch Drive Greensboro, NC 27407 **Date** 

By:\_\_

**Applicant** 

 $Phone: 336-854-5868 \quad Fax: 336-292-5416 \quad Email: pstroud@nc\text{-}ccim.org$ 

# **Scholarship Rules and Regulations:**

- Must be a current member of the North Carolina Chapter of CCIM
- This scholarship covers **up to** \$1,000 in class cost.
- This scholarship must be used for a CI Course offered within the state of North Carolina within one year of being awarded.
- The check will be dispersed upon the completion of the course. The recipient must send course completion certificate to Page Stroud at pstroud@nc-ccim.org
- This scholarship application, typed letter and current resume must be combined and sent as *one* PDF file or the application will be rejected.

I have read and understand the rules and regulations stated above.

Signature Date

## **Submission:**

Submit completed application to pstroud@nc-ccim.org of the North Carolina Chapter of CCIM

**Due Date: June 10, 2024** 

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