



Golden Opportunity Scholarship Application

Name: _____	I am using this fund to attend (check one)
Address: _____	IMM, Date _____
City/State/Zip: _____	AMM, Date _____
Phone: _____	Email: _____

Work Experience

Employed at: _____

Title: _____

Responsibilities: _____

Number of people that you directly manage: _____

Number of dry/wet slips and moorings: _____

Number of years at facility: _____

Is the facility a current member of AMI? _____

Work experience relevant to marina manager:
