



INDEPENDENT POOL & SPA SERVICE ASSOCIATION, INC.

PO BOX 254645
SACRAMENTO, CA
95865
888-360-9505
888-368-0432 (FAX)
info@ipssa.com

MATCHING GRANT REQUEST FORM

(Rev. 1/2022)

Date of request _____

Chapter name _____

Attention to: _____

Chapter mailing address _____

Charity name _____

Attention to: _____

Charity mailing address _____

Amount* _____

Should the grant be payable to the charity or to the chapter? Charity Chapter

Additional notes _____

Regional Director approval ** _____

BORD President/CFO approval ** _____

**Please submit documentation for this request and attach to this form before submitting. As soon as a matching grant has been approved, forward a copy of this form to accounting@ipssaa.com for disbursement of funds. Forms must be received by December 1.*

***All matching grants must be approved by your Regional Board and then submitted to the BORD President or CFO for approval.*

IPSSA, Inc. policy on matching grants: A matching grant fund shall be budgeted by the BORD for assisting individual regions and chapters for community involvement, safety programs, and promoting IPSSA to the public. The spirit of the matching grant is to foster IPSSA promotions by facilitating new ideas from individual members, chapters and regions.

The matching grant funds shall be allocated evenly by region in each given year. In the event that a region does not request funds in a given year, that region's representative may elect to reallocate their portion to the matching grant fund for redistribution. Any redistribution of funds must be approved by the BORD.

The BORD will match, dollar for dollar, up to the budget amount once a matching grant is approved by the regional Board.

Each region shall determine how to use its allotment of funds without BORD approval once it has been approved by the regional Board.

Individual members, chapters and regions of IPSSA in good standing qualify for matching grants.

- Matching grant requests must be submitted in writing to the regional director.
- The regional director shall qualify the request to meet the spirit of the matching grant program.
- The region must approve the grant by either a regional Board meeting, regional Board teleconference, or e-mail ballot, and the results will be posted in the regional minutes.
- The regional director shall then request the funds from the IPSSA BORD president or chief financial officer without BORD approval, as long as the requested amount does not exceed the region's budgeted amount.

The BORD shall review the matching grant program on a year-to-year basis and may elect to increase or decrease the fund in the following year's budget as it fits the need of IPSSA. (11/6/10)



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IPSSA SWIM FUND

Application

Chapter Name: _____

Swim Lesson Facility Name: _____

Facility Address: _____

Number of Persons to be Funded: _____

Submitter's Name: _____

Date: _____

Submitter's Email: _____

Phone: _____

The IPSSA Swim Fund is available on a first come first served basis while funds exist. A chapter may submit an application once per calendar year. The fund will match the chapter's check amount up to \$500.00.

Please enclose a copy of the chapter's check and a copy of the swim lesson facility's invoice with the application.

Please email to: accounting@ipssa.com or Fax to 888-368-0432



**INDEPENDENT POOL & SPA SERVICE
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IPSSA: Knowledge through Community, Education & Support

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IPSSA EDUCATION FUND INDIVIDUAL APPLICATION

To be eligible for a Scholarship

- ALL questions on the application must be answered completely, including the applicant's signature.
- Applications must be submitted within ninety (90) days of course completion.
- Scholarships will only be awarded after successful completion of a course.
- Completed applications will be reviewed quarterly by the Education Committee.
- Scholarships are awarded quarterly.
- One application per class, maximum two submissions per calendar year
- Applicants may receive up to \$200 per individual application, with a maximum of two applications per calendar year. Applicants that received a discount for classes sponsored by IPSSA are NOT eligible for an individual Scholarship for the same class.

The amount of each Scholarship award varies by the budget.

All applications MUST include all of the following:

1. A business card or other proof of self-employment
2. A copy of current business license, or a signed statement declaring a business license is not required
3. A copy of the receipt for the course.
4. A copy of the verification of successful course completion/certificate.
5. A copy of the license received as a result of any preparation course.

All incomplete applications returned for resubmission must meet stated deadlines.

Name _____

Home Address _____

City _____ State _____ Zip _____

Telephone _____ Email _____

Company _____

Address _____

City _____ State _____ Zip _____

Years in business _____ Business License # (if applicable) _____

City/County/State awarded _____

Are you self-employed in the pool/spa service industry (at least 50% of your net income)? Yes _____ No _____

List the name of the course and describe in detail the purpose, content, and applicability to your business; additional information may be included on a separate sheet.

Cost of course \$ _____ Course completion date _____

Name, address and phone number of the institution/organization providing the course:

Have you received any reimbursement for this class? No _____ Yes _____

If yes, how much and from whom?

Certification:

I certify that the information provided in this application is true and accurate. I understand that the information provided becomes the property of the Independent Pool and Spa Service Association Inc. (IPSSA), and that awards granted are at the sole discretion of the IPSSA Education Committee. In the event that an award is made to me, I understand that my name and some of the information contained in this application may be used for promotional purposes.

Applicant's signature _____

Date _____

Email completed application and all required documents to info@ipssa.com

Questions? Call 888-360-9505



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IPSSA: Knowledge through Community, Education & Support

IPSSA Education Fund Class Application

The purpose of the IPSSA Education Fund is to advance professional training and education of the Self-Employed Swimming Pool and Spa Service and Repair Professional by subsidizing classes that will expand his/her knowledge of their profession. Adequate promotion is vital for the success of your class. **The class must have an educational purpose for the self-employed pool service professional.**

The standard class funding is up to \$200 per student, with a maximum of \$4,000 per class. The funds vary according to the budget.

To be eligible for a Scholarship:

The following information must be submitted 60-days prior to the class.

The Application MUST include all of the following:

1. Sponsoring entity _____

2. Class title and description _____

3. Is the class open to any pool service professional? _____

4. Usual cost per student _____

5. Copy of promotional flyer with the IPSSA logo, for approval by committee.

6. Entity responsible for distribution of the flyer 30-days prior to the class

a. List locations where flyer will be distributed 30-days prior to the class

7. Projected number of students per class _____

8. Date/Time/Location of the class _____

Scholarship payment is issued upon receiving the following information:

1. A copy of the attendee list, and
2. A copy of the receipt for the class

Class instructors may receive funding of up to \$200 per student, with a maximum of \$4000 per class application. Class instructors may submit a maximum of two applications per calendar year.



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Water Safety Materials

Free water safety materials are now available to IPSSA Members. 50 Water watcher tags and safety brochures are available on a first-come- first-served basis, while quantities last.

Send us an email at info@ipssa.com with the below information to receive these materials free of charge:

Member Name: _____

Shipping Address: _____

City: _____ State: _____ Zip: _____