# I. Purpose

The Detroit Chapter of RIMS is offering scholarships up to $2,000 to:

1. College students interested in pursuing careers in risk management or within the insurance industry; and
2. RIMS Detroit deputy members pursuing various professional designations including, but not limited to, the Insurance Institute of America (IIA), American Institute of Chartered Property and Casualty Underwriters (AICPCU) or The National Alliance for Insurance Education & Research Certified Risk Manager (CRM) designations.

**II. Criteria**

1. Applicants must be:
   1. a resident of Michigan and currently enrolled in an accredited college or university and a candidate for a bachelor or master’s degree with a major or minor area of study in risk management or insurance and be interested in a career in risk management or insurance following graduation; or
   2. RIMS Detroit Chapter deputy members enrolled in an IIA, AICPCU, CRM or other related professional designation program. Applicants pursuing professional designations must be currently working in risk management or insurance and planning to enroll in a course or courses offered by a professional organization, or self-study for the same.
2. Applicants enrolled in an accredited college or university must have a minimum cumulative grade point average of a 2.5 or higher.
3. RIMS Detroit Chapter deputy members enrolled in professional designation must successfully pass their respective examinations.
4. An applicant must demonstrate a financial need. Specifically, a student and/or RIMS deputy member must not be receiving full reimbursement from his/her employer or other sources.
5. Past recipients and applicants may reapply.

**III. Procedures**

1. Applicants enrolled at an accredited college or university must submit the following items to the college’s Departmental Advisor:
2. Copy of their latest transcript
3. Resume
4. Completed Typed Scholarship Application

The Departmental Advisor will forward all submissions to the Chair of Detroit RIMS Scholarship Committee including:

1. Comments regarding eligibility and recommendations, including reasons for recommendations.
2. Company Tuition Reimbursement policy (if applicable)
3. Applicants pursuing various professional designations including but not limited to the IIA, AICPCU and/or CRM designations must submit the following to the Chair of the Detroit RIMS Scholarship Committee:
4. Copy of the application/enrollment form for the course(s) and/or examination being pursued, including cost/payment information
5. Completed Scholarship Application
6. Resume
7. Letter of recommendation from his/her supervisor
8. Company Tuition Reimbursement policy (if applicable)

**IV. Application Deadline and Selection**

All procedures must be completed, and application materials submitted to the Chair of the Scholarship Committee by March 31st, 2024.

1. The Scholarship Committee of the Detroit RIMS Chapter will review the applications, make selections, and submit recommendations to the Detroit RIMS Chapter Board of Directors for approval.
2. The Scholarship Committee Chair will notify the Scholarship recipient(s) and their Departmental Advisor or supervisor if pursuing various professional designations.

**V. Award**

Detroit RIMS will award scholarships based strictly on the Chapter’s financial ability to do so. The number of qualified applicants and the amount of funds available will determine the amount of the scholarship(s).

1. For recipients enrolled in an accredited college or university, checks payable to the recipient and their designated college or university will be mailed to the student by April 30th, 2024.
2. For recipients pursuing various professional designations, payment will be made to the recipient upon receipt of evidence that the recipient has successfully completed the course of study and successfully passed the examination for that course. Recipients must submit proof of payment for course fees, study materials and exam fees for appropriate reimbursement.

All applications and questions are to be directed to the Chair of the Scholarship Committee:

Frederick D. Driscoll

Director, Risk Financing and Captive Operations

Blue Cross and Blue Shield of Michigan

600 E. Lafayette, Mail Code 1801

Detroit, MI 48226-2998

313-983-1616 office

313-245-2845 fax

fdriscoll@bcbsm.com

**Applicant Name**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Last** **First** **Middle**

**If College Student:**

**University or**

**College Address** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Departmental Advisor** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Phone Number** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**College Major and Year**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**GPA**\_\_\_\_\_\_\_\_\_\_\_

**Insurance Courses taken to date**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Extra Curricular Activities**

**Special Achievements, Honors, Responsibilities**

**Financial Status** (can you attend school without financial assistance, provide details)

**Please write a brief statement regarding your career objectives and how this scholarship would help you achieve these objectives.**

**Future Plans** (career or future education you are planning after graduation)

**If a professional designation program/examination applicant:**

**Company Address:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Supervisor** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Phone Number** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**IIA/AICPCU/CRM Program** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Examination Date** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Other designations held**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**I understand that funds from this scholarship will be used for tuition, course and/or examination fees and other essential expenses required for my classes. I further understand that this scholarship is granted for the purpose of helping me secure a degree and/or a designation with a major emphasis in risk management or related areas.**

**Applicant Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Departmental Advisor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**YOU MAY PROVIDE ANY ADDITIONAL INFORMATION YOU FEEL WILL HELP THE COMMITTEE IN THE SELECTION PROCESS.**