



First Name:		Last Name:	
Address:			
City:		State:	
Phone:		Zip:	
Organization:		Position:	
Email:			

Class Year: ☐ Year 1 ☐ Year 2 ☐ Year 3
If attending Year 3, are you planning on taking the exam? ☐ Yes ☐ No

Please answer the following questions. If you need additional room, please attach a separate piece of paper.

What is your current involvement in community and economic development?

What do you hope to achieve from attending the Institute?

What value do you think it will have in your community or region?

What amount are you requesting for tuition? _____ **
What match can you provide for the remainder of your costs? _____

Please include any other information you want considered in this application.

Signature

Date

**** Please do not pay your tuition until a final decision is made on your application.**

Mail or email your completed application to: NWCDI, c/o Framework Meetings & Destinations
2192 E. Grandview Drive
Coeur d'Alene, ID 83815
wendi@frameworkmeetings.com