



**Idaho Medical Group Management Association**  
**American College of Medical Practice Executives (ACMPE)**  
**CMPE Scholarship Application**

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Board certification through the American College of Medical Practice Executives (ACMPE) is based on the body of knowledge specific to medical practice management and is the only board certification in medical practice management. Becoming a Certified Medical Practice Executive (CMPE) demonstrates your commitment to excellence in the profession and is recognized by physicians, executives, industry professionals and peers.

The Idaho Medical Group Management Association will reimburse Idaho MGMA members for the cost of the ACMPE objective exam and/or essay exam if they successfully take and pass either ACMPE exam during the current calendar year\*. If both tests are taken and passed, one member may be reimbursed the cost of both exams. To be eligible, Idaho MGMA ACMPE Scholarship applicants must be a current Active member of Idaho MGMA, and have been an Active Idaho MGMA member for at least two years.

*\* Scholarship reimbursement will be awarded to members who meet the above criteria, and request reimbursement, until such time as the funds are exhausted for the current calendar year.*

**First Name:** \_\_\_\_\_ **Last Name:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Employer:** \_\_\_\_\_ **Employer Phone Number:** \_\_\_\_\_

**Complete by checking (✓) items and attaching requested documentation:**

- YES  NO I am a current Idaho Resident. (required)
- YES  NO I have been an active Idaho MGMA Member for \_\_\_\_\_ years.  
*(Minimum 2 years required for Continuing Education Scholarship)*
- YES  NO I have been an active MGMA Member for \_\_\_\_\_ years.
- YES  NO I have been an active Student member of Idaho MGMA or MGMA since \_\_\_\_\_.
- YES  NO I have participated actively in Idaho MGMA through Committee and Volunteer opportunities.  
*If yes, please list any Idaho MGMA Committees or volunteer work you have served upon or provided:*  
 \_\_\_\_\_  
 \_\_\_\_\_

**All scholarship applicants must:**

- Be a current Active member of the Idaho Medical Group Management Association (for minimum of 2 years);
- Be a current resident of the State of Idaho.

**Please include with your application:**

Documentation from ACMPE showing you have passed the exam(s) in order to be reimbursed the ACMPE exam fee. If exam dates occur in December, please send documentation when received.

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After careful review of the material presented here, please complete this form and attach it as a cover sheet to the appropriate application materials. Applications will not be considered without this cover sheet. Return to:

**Idaho Medical Group Management Association**  
 PO Box 7674 | Boise, ID 83707  
 Telephone: 208-344-7888 Fax: 208-344-7903  
**Application Deadline: November 15, 2018**