

# 2026 Kansas Recovery Conference Scholarship Application

## “Bridging Generations: Every Piece Counts”

June 16<sup>th</sup> & 17<sup>th</sup>, 2026 Wichita, Kansas

### CAC Application for Conference Attendance and Registration

Application deadline: (Monday) March 30<sup>th</sup>, 2026

The Kansas Consumer Advisory Council for Adult Mental Health, Inc. (CAC) has received funding from a KDADS (KS Dept of Aging and Disability Services) contract that will allow the CAC to provide financial assistance to Kansas consumers. Priority for scholarships will be given to those who will be first time attendees, or who live in an area where there are currently no existing Consumer Run Organizations or support groups and demonstrate a financial need in order to participate in the Annual Recovery Conference. The purpose of this funding is to foster the transformation of mental health care to focus on recovery. **Please Note: To be eligible for this funding, a completed application must be received by email to [melissapattick@kansascac.org](mailto:melissapattick@kansascac.org) or U.S. Mail, postmarked on or before the deadline of (MONDAY) MARCH 30<sup>th</sup>, 2026.**

Conference information is available at [www.kansascac.org](http://www.kansascac.org)

Please PRINT the following information as you would like it to appear on the participant list. PLEASE DO NOT USE ACRONYMS.

Contact Information			
Name	Title		
Organization/Agency			
Residential Address			
City	State	Zip	
Telephone ( )	Fax ( )	Alternate Telephone ( )	
E-mail	Alternate E-Mail		

Emergency Contact Information			
Name	Relationship		
Organization/Agency			
Home Mailing Address			
City	State	Zip	
Home Telephone ( )	Work Telephone ( )	Emergency Telephone ( )	

Financial Support	
Have you attended the Recovery Conference in the past?	
<input type="checkbox"/> No	<input type="checkbox"/> Yes

SCHOLARSHIP APPLICATIONS MUST BE SUBMITTED BY MONDAY, MARCH 30<sup>th</sup>, 2026 FOR CONSIDERATION

**Additional Information**

On a separate piece of paper (typed please -- no hand written submissions will be accepted), please provide the review committee with your answers to the following questions. **Do not put your name** on any of these additional sheets of paper or identify yourself in any of the questions.

1. Why do you want to attend this conference?
2. How will you disseminate information obtained at this conference to local or statewide consumer groups?
3. What are the specific issues, related to mental health, in which you are most interested?
4. Are you currently involved with any related programs or activities? If yes, please describe.

**Please provide at least one letter of recommendation (that can show support for financial need) with your completed application. CAC Board of Directors and Staff are ineligible to provide letters of support!**

**Conference Attendance and Registration Conditions**

Please note that to be eligible for this opportunity, you must be a person having lived experience with a mental illness. If you are selected as a recipient, the Executive Director (upon notification) **will contact you by (Friday) April 10<sup>th</sup>, 2026**. Funding will cover the conference registration fee, one t-shirt and hotel fee for one night (based on double occupancy – you will have a roommate who will also be a scholarship recipient).

As a conference attendee recipient, you will be asked to do (or be aware of) the following.

1. Submit a 2 to 5 page report to CAC, in a format provided, within 2 weeks of the conclusion of the conference. Your report will be summarized and shared with CAC Board of Directors and others, such as KDADS, GBHSPC, SAMHSA, the sponsoring conference organization, and others.
2. Submit a completed evaluation form within 2 weeks of the conclusion of the conference. The form will be provided.
3. Share a room with another scholarship recipient during the conference.
4. Agree to have your name and contact information shared with the CAC.
5. Inform the CAC Executive Director, as soon as possible, if you are unable to attend the conference or will be delayed in meeting any of the above conditions.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Please submit your completed application to:**

**Kansas CAC**  
**ATTN: Recovery Conference Scholarships**  
 PO Box 56  
 Wichita, KS 67201  
 Phone: 620-639-2358 or 316-312-3479  
 or email to  
 melissapattick@kansascac.org

Please note that in order to be considered for this scholarship, your completed application must be received by CAC via email or **U.S. Mail and** be postmarked on or before the **deadline of (MONDAY) MARCH 30<sup>th</sup>, 2026**.

**Special Accommodations:** If you wish to volunteer information regarding any special assistance you may need, please contact Melissa Patrick at (316) 312-3479.

**Notice of Nondiscrimination:** The Kansas Consumer for Adult Mental Health, Inc. does not discriminate in its programs and activities on the basis of race, religion, color, national origin, gender, age, sexual orientation, marital status, political affiliation, status as a veteran, genetic information or disability. The following person has been designated to handle inquiries regarding nondiscrimination policies: Melissa Patrick, (316) 312.3479.

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## Kansas Recovery Conference Scholarship Application Questions

Please do not include any identifying information on this section (i.e. name). You may attach additional sheets of paper as needed to answer the questions.

1. Why do you want to attend this conference?

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2. How will you disseminate information obtained at this conference to local or statewide consumer groups?

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3. What are the specific issues, related to mental health, in which you are most interested?

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4. Are you currently involved with any related programs or activities? If yes, please describe.

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## Kansas Recovery Conference Additional Registration Information

The information below will be used for those who are selected as conference scholarship recipients.

T-Shirt Size (available sizes are Small-6X): \_\_\_\_\_

Food Allergies / Special Dietary Requirements – list any additional special requirements you have below (i.e. allergies, vegetarian or vegan meals, etc – please note if the request is due to a food allergy. We will make every effort to accommodate reasonable requests but cannot make any guarantees)

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Check here if you will be bringing a service animal to the conference \_\_\_\_\_

Please note any special accommodations needed (i.e. handicap accessible room, private room, materials in an alternative format, etc. – the Kansas CAC will make every effort to accommodate reasonable requests but cannot make any guarantees)

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*This conference was made possible through a grant from the Kansas Department for Aging and Disability Services*



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