



PROFESSIONAL DEVELOPMENT SCHOLARSHIP APPLICATION

SECTION 1

Name of applicant: _____ Years lived in Texas: _____

Address: _____

City, state, zip code: _____

Phone number: _____ E-mail: _____

SECTION 2

Present employer: _____ Present position: _____

Years of employment: _____ Direct supervisor: _____

Employer/supervisor's contact information:

Address: _____

City, state, zip code: _____

Phone number: _____ E-mail: _____

SECTION 3

PROFESSIONAL REFERENCES:

1. Name: _____ Phone: _____ E-mail: _____

Address: _____

City, state, zip code: _____

2. Name: _____ Phone: _____ E-mail: _____

Address: _____

City, state, zip code: _____



SECTION 4

I hereby certify the foregoing information is true and correct and agree if selected as a recipient of a Texas Chapter of American Public Works Association (TPWA) scholarship that the monies received will be used in assistance of attending the training course as defined by TPWA and that at least half of the scholarship amount will be used towards tuition/registration and any remaining amount will be used to pay for travel/accommodations and any unused amount will be returned to TPWA. If the cash awarded me is not used for the intended purposes, it will be returned to TPWA.

Signature of applicant: _____ Date: _____

- Attachments (check applicable boxes):
- Course description/details
 - Letter of interest
 - Letter of recommendation
 - _____
 - _____

**MAIL COMPLETED
APPLICATION TO:**

Texas Chapter of American Public Works Association
ATTN: Scholarship Committee
P.O. Box 1834
Grapevine, Texas 76099

Phone: (817) 410-4065
Fax: (817) 421-0126