Information about the TCMA Master of Public Administration Scholarship

This scholarship is open to all students studying for a master's degree in public administration from an accredited institution with an ICMA Student Chapter.

Each scholarship is for $2,500. One will be awarded in 2022 and two will be awarded in 2023. The purpose is to encourage the next generation of professionals in local government. Each scholarship must meet the following criteria:

1. The college or university must have an active ICMA student chapter.
2. The recipient must be a member of the chapter.
3. Awards are for tuition for a Master's program only.
4. Must be a Tennessee college or university.
5. A professor from the program must endorse the student.
6. If awarded the student must attend a TCMA conference.
7. Recipients will be chosen by the TCMA Awards and Nominations Committee.

All potential recipients are encouraged to complete the attached application and send to Pat Hardy, TCMA Executive Director, no later than August 17, 2022 (send to hardy@tncma.org). For further information about the scholarship feel free to call Pat at (423) 741-5258 or email questions to hardy@tncma.org.
The Tennessee City Management Association

Application for the TCMA
Master of Public Administration Scholarship

Your Name/Phone/Email: ____________________________________________ Date: __________

College/University: ______________________________________________

Do they Have an ICMA Student Chapter?   Yes    No   Are you a Member?   Yes    No

Degree You are Pursuing: __________________________________________

Semester for Requested Scholarship: ____________ Expected Graduation Date: ____________

Tell Us a Little About Yourself and Your Long-Term Aspirations:

____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Name/Phone of Professor Endorsing This Application: __________________________

Brief Assessment of the Student by the Endorsing Professor:

____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Signature of Applicant: ____________________________________________ Date: __________