FASD Reubin O'D. Askew School of Public Administration and Policy

Scholarship Application

Name: _____
LAST FIRST MI

District Name: _____

Title: _____

Organization Address: _____
Street City County

Work Phone: _____ **Home Phone**: _____

Fax #: _____ **E-Mail:** _____
Please Print

*If needed, please attach additional pages for explanation of the following questions.

1. Briefly describe how your attendance at this program will benefit you as a professional:

_____

_____

_____

2. Briefly state how your attendance at this program will benefit your organization:

_____

_____

_____

The program tuition for the 2018 program is $1200/Members and $1500.00/Nonmembers

3. Briefly state why you are applying for a tuition scholarship for the CDM Program:

_____

_____

_____

If awarded this scholarship, I will submit upon completion of the program a written report to the FASD, detailing advantages gained through attendance and participation of this course, which may be published in the FASD news letter.

*By signing below you are committing to the completion of the course and its project.

_____ _____
Applicant's Signature Supervisor's Signature

<u>Application deadline is November 22, 2017</u>

Please submit this form with your application