



JAY EDWARDS CPM SCHOLARSHIP APPLICATION



Applicant Name: \_\_\_\_\_

Address: \_\_\_\_\_

Are you a public employee? Yes \_\_\_\_ No \_\_\_\_

Number of years in public service: \_\_\_\_\_

If yes, Employer's Name and Address: \_\_\_\_\_

Does your current employer support your participation in the CPM program? Yes \_\_\_\_ No \_\_\_\_

Are you a supervisor or manager? Yes \_\_\_\_ No \_\_\_\_

Position held: \_\_\_\_\_

Supervisor's name \_\_\_\_\_ Phone Number \_\_\_\_\_

Are you willing to commit to completing the CPM program? Yes \_\_\_\_ No \_\_\_\_

How many hours per week are you willing to invest in completing the assignments per month once you have started the CPM program? \_\_\_\_Hrs/Mo.

What are your career plans? \_\_\_\_\_

Describe why this scholarship is important to you and why you feel you are the best applicant for this scholarship: \_\_\_\_\_

Describe your leadership activities: \_\_\_\_\_

Describe your participation/contribution to community and civic activities: \_\_\_\_\_

Describe how you think attending the CPM program will benefit you/your agency: \_\_\_\_\_

Provide any other comments/relevant information that will help the Scholarship committee: \_\_\_\_\_

Submit at least two letters of reference from your present or past employers/co-workers.

Optional: Submit one letter of reference from someone in your community that is familiar with your community/civic activities.