

**TENNESSEE PERSONNEL MANAGEMENT ASSOCIATION  
APPLICATION FOR  
TPMA SCHOLARSHIP**

**Instructions for completing application**

- Please type or print clearly in ink.
- Sign and send the completed application with any attachments to:

**TPMA Scholarship Chairperson  
P.O. Box 190485  
Nashville, Tennessee 37219**

- Applications must be received by **March 31, 2009**

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Applicant Name:

Address:

City, State, and Zip:

Social Security Number:

Name of present or last employer:

Position title:

Please explain below what your planned professional development goals are and how you intend to use the scholarship from TPMA to further these goals:

Are you a member of TPMA?                      Yes                       No

Have you previously received assistance from TPMA?      Yes                       No

Briefly explain your long-range goals in the human resource profession:

Applicant signature:

Date:

Telephone #:

E-mail address: