



**WRIGHT STATE  
UNIVERSITY**

**Master of Public Administration  
Graduate Scholarship Application**

Name: \_\_\_\_\_ UID: \_\_\_\_\_  
First Middle Last

Address: \_\_\_\_\_  
Street  
\_\_\_\_\_  
City, State, Zip

Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Year MPA Expected  
began: \_\_\_\_\_ Graduation  
Date: \_\_\_\_\_

- Note**
1. First consideration will be given to those with documented financial need and academic achievement.
  2. Students receiving a Graduate Research Assistantship are not eligible.
  3. Current and new students must be accepted in degree-seeking status (regular, conditional, provisional).
  4. Award amounts may vary.

**Attach** Essay on what makes you the best choice for this award, to include your academic goals (or your standing in the program if you are already in the program), your professional goals, extracurricular service activities, and need for scholarship funds.

**Sign** I hereby give my permission to the Office of Financial Aid to release all information I have provided on my application, my academic record and possible information from my financial aid application to nonuniversity groups for the purpose of further consideration for scholarship assistance. If awarded, my scholarship information may be released to the media and to outside donors who may be funding my scholarship. I understand that misrepresentation of facts on the application will be cause for disqualification. The University reserves the right to cancel a scholarship award if a recipient is found guilty of academic dishonesty.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

For first consideration, return your completed application and essay by **March 5, 2018** to:

Wright State University  
Master of Public Administration  
Attn: Jerri Killian  
325 Millett 3640 Colonel Glenn Hwy  
Dayton, OH 45435  
or email: [jerri.killian@wright.edu](mailto:jerri.killian@wright.edu)