



WPTA Scholarship Application

Applicant MUST be a current WPTA member

Name _____ Title _____

Phone _____ Email _____

Entity _____ Population _____

Address _____

Name of Educational Event _____

Date(s) _____ Location _____

Estimated costs to attend:

Registration Fee _____ Lodging _____ Travel _____

Scholarship amount requested (max of \$750) _____

Remaining amount to be paid by entity _____

I hereby apply for scholarship funds to attend the above described educational event and attest that the information submitted in and with this application is true and accurate to the best of my knowledge.

Applicant's Signature and Title

Date

I express support of this application and confirm our commitment to grant the time off and funding necessary for the applicant's attendance at this educational event.

Supervisor's Signature and Title

Date

Submit application via mail or email to:

WPTA Scholarship Committee
c/o Lindsay Chambers, City of Newcastle
12835 Newcastle Way #200
Newcastle, WA 98056
(425) 649-4444 lindsayc@newcastlewa.gov