**TENNESSEE MATHEMATICS TEACHERS' ASSOCIATION**

**TEACHER/SCHOLAR SCHOLARSHIP APPLICATION FORM**

Please furnish complete answers to each item below.

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LAST NAME FIRST MIDDLE

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STREET & NUMBER

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CITY STATE ZIP CODE

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UNVERSITY EMAIL ADDRESS\*\* HOME PHONE

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SCHOOL/SCHOOL SYSTEM WHERE EMPLOYED

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NAME OF COLLEGE OR UNIVERSITY ATTENDING

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DEGREE PROGRAM

A complete application must include the following:

1) Scholarship Application Form

2) A cover letter that includes a brief statement of what you hope to achieve through your advanced studies

4) Current transcript

5) Two sealed letters of recommendation (may be mailed separate from other application materials)

(At least one recommendation must be from a member of the mathematics or mathematics education faculty at your university with whom you have completed at least one class.)

Applications are due on **May 1**. You will be notified at your university email address when we receive your application.

Email complete application packet to: Rebecca Darrough

[darroughr@apsu.edu](mailto:darroughr@apsu.edu)

\*\*Please use ONLY your official university email address. We will not accept applications with any other type of email address.