



**University of Tennessee, Knoxville**  
**Masters of Public Policy and Administration**  
**Program Application for UT Institute for Public**  
**Service Graduate Assistantship to Begin Spring 2018**

*Email all completed application materials to [dfolz@utk.edu](mailto:dfolz@utk.edu) no later than **November 30, 2017**.*

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

Current Home Address: \_\_\_\_\_  
\_\_\_\_\_

Telephone number: \_\_\_\_\_

Email address: \_\_\_\_\_

UT Student ID number (if currently enrolled): \_\_\_\_\_

Undergraduate Overall GPA: \_\_\_\_\_

Undergraduate Institution & Major: \_\_\_\_\_

Graduate Record Score:

Verbal: \_\_\_\_\_ Quantitative: \_\_\_\_\_ Combined (verbal & quant): \_\_\_\_\_

Semester/Year Enrolled (or plan to enroll) in the MPPA program: \_\_\_\_\_

Total Hours Completed so far in the MPPA program, if any: \_\_\_\_\_

Current overall GPA in the MPPA: (if applicable): \_\_\_\_\_

Specialized Track Selected:  Management  Policy  Both  Undecided

Projected Semester & Year of Graduation from MPPA program: \_\_\_\_\_

Current (or planned) Status:  Full-time  Part-time

List any assistantships or scholarships you have received as a graduate student:

\_\_\_\_\_

Do you receive a fee waiver as a benefit of your employment (If yes, explain briefly):

\_\_\_\_\_

**Please indicate the award(s) for which you would like to apply:**

The IPS Graduate Assistantship

**In addition to this form, please submit as separate documents the following items:**

1). **Personal Narrative** – This should be a typed statement (maximum 2 pages, spaced 1.5 lines) that describes your background, work experience, educational goals, career goals, professional aspirations, skills, qualities, and attributes you bring to the program, any challenges confronted in pursuing graduate school, and the reasons you are applying for a MPPA program scholarship, assistantship, or award.

2). **Current Resume**

*Your initials below indicate that the information you provide in connection with this application is accurate to the best of your knowledge and that you agree to abide by the terms or conditions of the MPPA assistantship or scholarship.*

**Your initials:** \_\_\_\_\_

**Date form completed:** \_\_\_\_\_

**Save this application form with your last name in the file name and email it along with your personal narrative and your resume documents to:**

Dr. David H. Folz  
MPPA Director  
213 Baker Center  
1640 Cumberland Avenue  
Knoxville, Tennessee 37996-3340  
[dfolz@utk.edu](mailto:dfolz@utk.edu)