**Providers’ Council and Suffolk University**

**Master of Public Administration Scholarship**

The Providers’ Council, in partnership with Suffolk University, is pleased to announce that we are now accepting applications for our 2020 **Providers’ Council/Suffolk University** **Master of Public Administration Scholarship**. The scholarship promotes the Council’s ongoing objective of developing the sector’s workforce as well as its longstanding partnership with Suffolk University.

The Providers’ Council and Suffolk University Master of Public Administration Scholarship is a one-time award of $4,000 for a Council member employee who is entering or is currently enrolled in Suffolk University’s Master of Public Administration program. This scholarship is based on leadership and merit as well as need, and eligible applicants must have successfully completed the Council’s *Certificate in Nonprofit Human Services Management Program*.

Applicants must submit a complete application in order to be considered. Specific details can be found on the Master of Public Administration Scholarship Application. Applicants will be assessed through transcripts, financial need, resumes, personal statements, interviews and references. Successful applicants should show exceptional academic dedication as well as a commitment to the human service sector.

Applicant must complete the Scholarship Application form and essay, in addition to Suffolk University’s Master of Public Administration application. The Scholarships Application should be mailed, emailed or faxed to the Providers’ Council by Monday, June 29, 2020. Please note that, at this time, we strongly encourage you to email this application to eadams@providers.org, if you are able to do so. If you would like to complete this application electronically, our online form can be found [here.](https://cloud4good.tfaforms.net/388810)

*This one-time scholarship awards one* ***Certificate in Nonprofit Human Service Management Program graduate*** *with $4,000 towards the costs of the Master of Public Administration program at Suffolk University. The scholarship is contributed by the Providers’ Council and by Suffolk University. Both organizations may be represented on the selection committee.*

**Candidate Requirements**

* Have successfully completed the Providers’ Council’s *Certificate in Nonprofit Human Service Management* *Program* at either Suffolk University or Clark University within the past seven years.
* Currently be employed at a Providers’ Council member agency in good standing.
* Accepted into the Master of Public Administration program at Suffolk University.
* Demonstrate through their resumes, personal statements and references a commitment to a career in the human services sector.
* Complete the Scholarship Application form and personal statement. It should be mailed, emailed or faxed to the Providers’ Council by June 29, 2020.

**Applications must include:**

* **Personal Statement** 2-3 pages on how a Master of Public Administration from Suffolk will help you further contribute to the human services sector.
* **Statement of financial need** on how this scholarship affects your ability to attend Suffolk University’s MPA program.
* **Letter of acceptance** to the Master of Public Administration program at Suffolk University.
* **Transcript from *Certificate in Nonprofit Human Service Management Program*.**
* **Two letters of professional and/or academic recommendation**
	+ At least one letter of recommendation must come from the applicant’s supervisor discussing the candidate’s commitment to the field of human services, the contributions the candidate has made to their agency and the potential to assume a leadership position within the agency.
* **Signature of approval** from the agency’s executive director or CEO.
* **Resume.**
* **Complete applications must be submitted by June 29, 2020.**

### **Providers’ Council and Suffolk University**

### **Master of Public Administration Scholarship**

### **SCHOLARSHIP APPLICATION**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, employed by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, am applying for the Providers’ Council and Suffolk University Master of Public Administration Scholarship, created to **support the Council’s ongoing objective of promoting and developing the human services sector’s workforce,** for the academic year beginning in September 2020. I understand that this scholarship is a one-time grant of **$4,000**, and will be provided as reimbursement upon successful completion of at least one year of Suffolk University’s MPA program. I understand the scholarship selection is based on merit as well as financial need. I will remain with my employer during the master’s program and one year following the completion of my degree. If selected, I agree to participate in marketing of the scholarship, including publication of photo, name and sharing my experience at Council events.

# Contact Information

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State\_\_\_\_\_\_\_ Zip code\_\_\_\_\_\_\_\_\_ Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Supervisor Support

As supervisor of the above-named applicant, I have attached a letter of recommendation outlining why I think this employee is an excellent candidate for this scholarship.

Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name and Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Head of Agency Support

As President/CEO/Executive Director, I approve of this application for the above-named applicant to be considered for the Providers’ Council and Suffolk University Scholarship. My agency is a member of Providers’ Council.

Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name and Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please review your application and make sure that all requirements are included:**

*\*Please refer to the Scholarship requirements for details on each item*

**\_\_** 2-3 page personal statement

**\_\_** Statement of financial need

**\_\_** Letter of acceptance from Suffolk University MPA program

**\_\_** Transcript from *Certificate in Nonprofit Human Service Management Program*

**\_\_** Two letters of recommendation

**\_\_** Resume