



# Jackie Wilkerson Memorial Scholarship Application

Application Deadline: December 15, 2018

Incomplete or late applications will not be considered

Applicant Name \_\_\_\_\_

Address, City, State, Zip \_\_\_\_\_

Daytime Phone \_\_\_\_\_ Other Phone \_\_\_\_\_

EDUCATION: Circle the highest graded completed High School 9 10 11 12 College 1 2 3 4

EMS Program(s) attended \_\_\_\_\_

Current Tennessee EMS License Number \_\_\_\_\_

Other State Licenses/Certifications \_\_\_\_\_

**EMPLOYMENT INFORMATION:** Current Employer: \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_ Hire Date \_\_\_\_\_

Contact person \_\_\_\_\_ Position \_\_\_\_\_

Other Employment History in the past 5 years Employer	Position	From - To

**EMS PROGRAM INFORMATION:** Level of scholarship requested:

Paramedic - Up to \$2,500

Critical Care Paramedic - Up to \$1,000

Are you currently enrolled  Yes  No Have you been admitted/accepted into a program?  Yes  No

Graduation / Course Completion (Month/Year) \_\_\_\_\_

Program / School \_\_\_\_\_

**AFFIDAVIT:** As an applicant for the Jackie Wilkerson Memorial Scholarship, I hereby certify that the information contained herein is true and correct and I grant the MTEMSDA Scholarship Committee permission to verify any and all information I have provided. Payment will be after successful completion of the course.

\_\_\_\_\_  
Applicant's Signature Date

If you will be receiving any other funds (grants, loans, scholarships, etc. Please disclose below. If none, write "None." If your employer is paying for your Paramedic or CCEMT-P Program, such must be listed below.

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

**FOR MTEMSDA USE ONLY**

Date Received \_\_\_\_\_  
Letter- Applicant Received \_\_\_ Yes \_\_\_ No  
Letter- Supervisor Rec'd \_\_\_ Yes \_\_\_ No  
Letter- Recommendation \_\_\_ Yes \_\_\_ No  
Application is legible \_\_\_ Yes \_\_\_ No  
Scholarship Awarded \_\_\_ AEMT \_\_\_ CC \_\_\_ EMTP  
Amount \_\_\_\_\_  
Scholarship Denied \_\_\_ Yes Reviewer \_\_\_\_\_

**Application Checklist**

- \_\_\_ Completed and signed JWMS application
- \_\_\_ A single page typewritten essay explaining why they wish to pursue an EMS career or to further their training.
- \_\_\_ A minimum of 2 letters of recommendation with required information from appropriate people.
- \_\_\_ Submit application and supporting paperwork electronically to Dwight Davis - [Dwight.N.Davis@tn.gov](mailto:Dwight.N.Davis@tn.gov)