**Applicant’s name:** Applicant’s name

**Applicant’s address:**  Applicant’s address

**City:** City

**State:** State

**Zip Code:** #####

**Applicant’s phone: (home)** ###-###-####

**(cell)** ###-###-####

**Applicant’s email address:** Applicant’s email

**Applicant’s agency:**  Agency

**Address of agency:** Address of Agency

**City:** City

**State:** State

**Zip Code:** #####

**Name of Nominating Chief/Sheriff:** Name of Chief/Sheriff

**Chief/Sheriff phone: (work)** ###-###-#### **(cell)** ###-###-####

**Chief/Sheriff email address:** Chief’s email address

**Chief/Sheriff Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\*\* Nomination must be signed by the Chief/Sheriff to ensure the nomination is approved by the submitting agency\*\***

**Please attach the following:**

* Name of University or accredited institution to be attended.
* Advanced degree being sought.
* A brief essay on why the applicant is deserving of the award, the reason for seeking the degree, and how the degree will further the applicant’s career goals.

**Completed applications must be received by the**

**Chairman of the MCPA/MSA Awards Committee**

**no later than: May 15, 2026.**

**Maryland Chiefs of Police**

Mail: Captain Chris Williams

MCPA Awards Committee Chairman

Howard County Police Department

3410 Courthouse Dr.

Ellicott City, Maryland 21043

Email: cwilliams@howardcountymd.gov

Phone: 410-313-2304

**Maryland Sheriff’s Association**

Mail: Assistant Sheriff Keena Jones

MSA Awards Committee Chairman

Montgomery County Sheriffs’ Office

50 Maryland Avenue, T400

Rockville, MD 20850

Email: Keena.Jones@montgomerycountymd.gov

Phone: 240-777-7011