



GSCPA LEADERSHIP ACADEMY  
Participant Application

**INSTRUCTIONS:** Type or print information clearly. Please complete each section fully; additional paper may be included to complete any section as needed. Application must be signed and returned no later than ~~May 30, 2018~~.

**SECTION 1: PERSONAL DATA**

Full Name: \_\_\_\_\_ Member Number: \_\_\_\_\_  
Home Address: \_\_\_\_\_  
Home Phone: \_\_\_\_\_  
Firm/Company Name: \_\_\_\_\_  
Business Address: \_\_\_\_\_  
Email Address: \_\_\_\_\_ Business Phone: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Race: \_\_\_\_\_  
Gender:  Male  Female Licensed CPA?  Yes  No  
If yes, License Number and State: \_\_\_\_\_

Area(s) of Expertise (check all that apply):

- Public Practice (size of firm \_\_\_\_\_)  Industry  
 Educational Institution  Other \_\_\_\_\_  
 Government

**SECTION 2: EDUCATION**

Please specify the **highest** level attained:

- AA Degree  MA Degree  
 BA Degree  PhD Degree  Other: \_\_\_\_\_

List the leadership positions held, special honors and awards received at school:

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

**SECTION 3: WORK EXPERIENCE**

Present Title or Position: \_\_\_\_\_

Direct Supervisor's Name: \_\_\_\_\_

Briefly Describe your responsibilities in your job:

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

What do you consider your highest career achievement to date?

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**Employment Record**

List in reverse chronology – last position first:

EMPLOYER	TITLE	PERIOD OF SERVICE

**Business/Professional Affiliations (if any)**

Please include leadership role, chapter positions, etc.

NAME OF GROUP	POSITIONS HELD OR ASSIGNMENTS	PERIOD OF AFFILIATION

**SECTION 4: COMMUNITY INVOLVEMENT**

Include community, civic, religious, political, governmental, social, athletic or other activities. Do not include business/professional activities.

ORGANIZATION	ASSIGNMENT/POSITION	DESCRIBE RESPONSIBILITIES

If you have additional *significant* community, civic, religious, political, governmental, social, athletic or other areas of active involvement, please attach statement. May include leadership activities during school years.

**SECTION 5: GENERAL**

What do you hope to gain from the GSCPA Leadership Academy?

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In your opinion, what are the three most important issues facing the accounting profession. Why?

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How did you hear about the Leadership Academy? \_\_\_\_\_

Who nominated you for the Leadership Academy? \_\_\_\_\_

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One goal of the Leadership Academy is to position participants to accept responsibility as organization leaders. How would you utilize the training you receive in the Academy to enhance your involvement in the Society in ways you are not currently doing so?

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**SECTION 6: COMMITMENT**

To graduate from the GSCPA Leadership Academy, participant is expected to attend all four sessions.

*I understand the purposes of the GSCPA Leadership Academy program; and, if I am selected I will devote the time and resources necessary to complete the program. Attendance at all four sessions is mandatory for completion. Should an emergency arise, a written statement must be submitted to the Leadership Academy Task Force no later than three weeks after the missed session for determination of continuance. If possible, a form of make-up will be determined by the Task Force on a case-by-case basis. Even though emergencies arise, any participant missing more than the allotted attendance requirement may be asked to withdraw from the program and no portion of the tuition shall be refunded. I understand the above commitments and agree to be bound by them in signing this application.*

**APPLICANT SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**PRINT NAME:** \_\_\_\_\_

**Tuition:** If accepted into the GSCPA Leadership Academy program, you will be billed for the \$2,100 tuition fee and payment is due prior to the first session **The tuition covers all program expenses, meals and lodging for sessions 1, 2 and 4. Session 3 is a one day session only – all meals and program expenses are covered on that day. A total of 36 hours of CPE credit is available.**

**MAIL APPLICATION TO:**  
GSCPA Leadership Academy  
3353 Peachtree Road NE, Suite 400  
Atlanta, GA 30326

**OR FAX TO:**  
404-237-1291  
Attn: Jennifer Poff

**DEADLINE FOR APPLICATION SUBMITTAL IS May 30, 201&**  
*APPLICANTS WILL BE NOTIFIED OF ACCEPTANCE BY MID-June.*