



## **Educational Foundation Merit Scholarship**

Of the Georgia Society of Certified Public Accountants, Inc

In collaboration with the South-Side Chapter of the GSCPA.

Money Award (up to four \$1,000 Scholarships)

### **Scholarship Criteria and Requirements of Application**

Applicant must:

- Demonstrate a commitment to pursuing a career in accounting.
- Be a rising junior, senior, or graduate accounting major
- Be a permanent resident in one of the following areas
  - South Fulton, Clayton, Henry, Fayette, Spalding, Butts, Pike, Lamar, East Meriwether, Pike, North Upson
  - Attend a University in the State of Georgia
- Maintain an Overall grade point average & Accounting grade point average of 3.0 or higher on a 4.0 scale.
- Write a 1 page paper on the role of the modern day accountant from the stand point of one of the following practices:
  - CPA who practices in industry
  - or
  - CPA who practices in public accounting

(\*Be able to relate to your audience\*).

### **Instructions**

- Complete this application form in its entirety. Note that you will need the assistance of an accounting faculty administrator to assist you in completing the application.
- Attach the following items to your application:
  1. One page paper on one of the above topics - (Grading will be based on, but not limited to: Fundamental writing skills, creativity, relevance, concision, etc)
- Return the application and paper to one of the following
  - Email to Rich Hlozek at [rich@brownnelms.com](mailto:rich@brownnelms.com)
  - Fax to Rich Hlozek at 770-461-0589
- Application and Essay should be submitted together and **received by** no later than **December 15, 2009**.



**TO BE COMPLETED BY THE STUDENT**

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

Social Security Number\_\_\_\_\_

Date of Birth\_\_\_\_\_

Phone Number\_\_\_\_\_

PERMANENT ADDRESS – (as noted above)

Street\_\_\_\_\_

City/State/ZIP\_\_\_\_\_

Phone Number\_\_\_\_\_

Email Address\_\_\_\_\_

School Attending Now\_\_\_\_\_

Expected Graduation Date\_\_\_\_\_

School where scholarship will be used\_\_\_\_\_

**TO BE COMPLETED BY ACCOUNTING FACULTY ADMINISTRATOR**

Print Faculty Name\_\_\_\_\_

Faculty Signature\_\_\_\_\_

Scholarship Applicant above Accounting GPA\_\_\_\_\_

Scholarship Applicant above Overall GPA\_\_\_\_\_

*One Profession, One Voice*