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| School of Accountancy Logo  **School of Accountancy Scholarship Application** |
| Qualifications:   * Declared accounting major * Overall grade point average (GPA) of no less than 3.00 and an accounting GPA of no less than 3.0 * Mandatory attendance at the Accounting Day Awards Ceremony (Scholarship/award recipients will not be notified in advance.)   Instructions:   1. Complete this application form in its entirety. Only complete applications will be considered. 2. Attach an up-to-date resume. 3. Return your completed application and resume to the School office by the specified deadline. |
| Deadline: Submit to Room 2203 by Friday, February 28, 2014, 5:00 p.m. |
| ***General Information*** *(please type or print clearly)*    Full Name (If married female, include maiden name): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_    Name You Prefer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Eagle I.D. Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_    E-mail Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_    **Permanent (Home) Address and Telephone Number** (Some awards require Georgia residency)    Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_Zip: \_\_\_\_\_\_\_\_\_ |
| ***Academic Standing***  Expected Grad. Date (Sem/Yr): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_ Graduate (or post-bac.) Graduate School Overall GPA: \_\_\_\_\_\_  \_\_ Sr. \_\_ Jr. \_\_ Soph. Undergraduate Overall GPA: \_\_\_\_\_\_ Upper-level Accounting GPA: \_\_\_\_\_\_ |
| ***Objective*** *(Optional. Some donors wish to assist students who are pursuing a specific personal or career objective)* |
| ***Consent Agreement*** *(Agree by checking Yes as indicated below)*    \_\_\_\_ Yes, I want to be considered for a scholarship. Please verify my records to confirm my eligibility.    \_\_\_\_ Yes, I understand that I must attend the Awards Banquet to be eligible for a scholarship or award.  (This year’s banquet will be held on **April 30, 2014 in the Nessmith Lane Building**.)    Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| ***Awards Banquet Tickets***    \_\_\_\_ I have attached $5 to purchase my admission ticket.    *\_\_\_\_\_* I wish to purchase \_\_\_\_\_ guest tickets @ $15.00 each.    $\_\_\_\_\_\_\_ Total Amount Attached *(please make checks payable to Georgia Southern University Foundation)* |
| **Checklist: \_\_ Completed Application; \_\_\_ Resume; \_\_\_\_ Money** |