

**TALLAHASSEE CHAPTER
ASSOCIATION OF GOVERNMENT
ACCOUNTANTS**



**SCHOLARSHIP APPLICATION FORM
2020
EDUCATIONAL ADVANCEMENT**

TALLAHASSEE CHAPTER

Association of Government Accountants

2020 Scholarship Guidelines and Eligibility Criteria

DEADLINE

Scholarship applications and required documentation must be received by the close of business **Monday, June 15, 2020**. Scholarships will be presented by June 30, 2020.

TYPE AND ELIGIBILITY FOR SCHOLARSHIPS

The Tallahassee Chapter Association of Government Accountants (AGA) is pleased to offer:

A **\$1000** academic scholarship for **part-time** or **full-time study**

- Scholarship must be applied toward a part-time or full-time undergraduate/graduate study in a financial management academic discipline* or public administration
- Preferred candidate to be actively involved in community service projects but not required

*This includes accounting, auditing, budgeting, finance, and business administration.

CRITERIA FOR AWARD

The **Scholarship** will be awarded on the basis of the candidate's potential for making a meaningful contribution to public financial management and the candidate's involvement in the community. Academic achievement prior to application is an indication of potential for successful study, but is not the only criteria that will be considered in awarding these scholarships. Candidate must have a minimum grade point average of 3.0 on a 4.0 scale.

LETTERS OF RECOMMENDATION

All **Scholarship** candidates must include a reference letter from a professional such as a professor, guidance counselor, employer etc. written on professional letterhead. Any community service recognition must include a letter of recommendation from the community service organization written on professional letterhead.

REQUIRED ESSAY

All scholarship candidates must submit an essay with their application. The essay cannot be more than two double-spaced pages. Make sure to have your full name on the document which must contain the following heading:

“The Value of Financial Integrity within Government Operations”

APPLICATION CHECKLIST

- AGA Scholarship Application
- Your required essay
- Professional letters of recommendation
- Copy of Driver's License or other photo ID
- Your official college academic transcript should be mailed to AGA Tallahassee, P.O. Box 1335, Tallahassee, FL 32302

Tallahassee Chapter, AGA Scholarship Application

PERSONAL INFORMATION

Name _____

Address _____

City _____ State _____ Zip _____

Home Phone (____) ____-____ Other Number (____) ____-____

E-mail _____

ACADEMIC INFORMATION

What is your current collegiate status?

Full-time Student Part-time Student

How are you currently classified (Freshman, Sophomore, etc.)? _____

When do you expect to graduate? _____

What is, or will be, your declared major? _____

What is your current Cumulative Graduate Point Average? _____

Please tell us about your extracurricular activities including any offices held. Also, please list any honors you have received in college. If you need more space, attach a separate sheet and indicate here that you are attaching that sheet.

Extra Sheets Attached?

Yes

No

CURRENT EMPLOYMENT

Name of employer _____

Address of employer _____

City _____ State _____ Zip _____

Phone (____) ____-____

Your Title _____

Length of Service _____

Is this position	full-time	part-time
Is this position	permanent	temporary

CHECKLIST AND SIGNATURE

Did you submit each of these documents?

- | | | |
|---|------------------------------|--|
| • Completed Scholarship Application? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| • Copy of Official transcripts? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| • Required essay? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| • Professional letters of recommendation? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| • Copy of Driver's License or other photo ID? | <input type="checkbox"/> Yes | <input type="checkbox"/> No <input type="checkbox"/> N/A |

By signing below, you acknowledge that you accept the decision of the Chapter Awards Committee as final. *(Typing in your name is acceptable)*

Signature of Applicant _____ Date ____/____/____

E-Mail application, essay, copy of Driver's License or other photo ID, and any letters of recommendation to
TallahasseeAGA@gmail.com

OR

Mail application, essay, copy of Driver's License or other photo ID, and any letters of recommendation to:

Attention Scholarship
Tallahassee Chapter, Association of Government Accountants
P.O. Box 1335
Tallahassee, FL 32302

If you have any questions, please contact Alexandra Weimorts, Education Chair, at tallahasseeaga@gmail.com.