



Association of Government Accountants

OZARKS CHAPTER

2009-2010 SCHOLARSHIP APPLICATION

Name(Last, First, Middle)	Phone number:
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To be completed by applicants attending College:

College or University Attending:	Major:	
	Minor:	
Hours completed for each semester attended	Major GPA	Cumulative GPA
		Graduation Date:

To be completed by high school students:

High School	Expected Graduation Date	
ACT Score	SAT Score	College or University to which Admitted

LOCAL ADDRESS: Street	Apartment
City	State/Zip
County	email address:

PERMANENT ADDRESS: Street	Apartment
City	State/Zip
County	Phone

Is applicant a member of the Association of Government Accountants?(AGA) Yes No



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Employer's Address	Hours Worked Per Week
Job Title	Job Duties

Scholarships and/or Financial Awards <u>Received</u> during 2009-2010 (Amount of Scholarship/Award)	
Source	Amount

Scholarships and/or Financial Awards <u>Expected</u> During 2009-2010 (Amount of Scholarship/Award)	
Source	Amount

College, High School and/or Community Honors	Date
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College, High School and/or Community Activities

Organization	Office Held	Date
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Your Contribution

Extracurricular Activities



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Short essay answering these questions: summarize your background, interests, and career goals; explain why you need this scholarship award and why you feel you are qualified; tell us your what plan you would have to advance the profession of Government Accounting?

I declare that this information is correct and complete.	Signature
Sponsoring teacher's signature. I support this student's application for scholarship.	Signature