



GGFOA Annual College Scholarship

The Georgia Government Finance Officers Association (GGFOA) will offer one (1) scholarship in an amount not to exceed \$1,500 annually to a student who is pursuing studies in public finance or public administration; or a career in government finance. The scholarship recognizes outstanding performance in the study of public finance at the undergraduate and graduate level, encouraging a career in state and local government. Eligibility and criteria of the scholarship is:

- Applicant must be a full-time resident of the State of Georgia.
- Applicant must be a GGFOA member or a member with student status at the time of the application.
- Applicant must be a student at a State of Georgia accredited college or university during the fall semester the scholarship is awarded. Applicant must be enrolled in a major of public finance, public administration, or accounting. Full-time enrollment consists of either six (6) hours of graduate study or twelve (12) hours of undergraduate study. Part-time enrollment consists of either three (3) hours of graduate study or six (6) hours of undergraduate study. Scholarship awards will be pro-rated based on the hours of study.
- Applicant must provide a nomination in letter form by the head of the applicable program at their college or university (e.g., public administration, accounting, and/or finance).
- Applicant must provide an official transcript of grades from their college or university.
- Applicant must provide proof of admission at a State of Georgia accredited college or university for the fall semester that the scholarship is awarded.
- Preference will be given to a GGFOA member, spouse, child, and other dependent; and an employee of GGFOA governmental entities.

Applicant must submit the following documents by **September 1, 2022** to the Chair of the GGFOA Scholarships/Awards Committee, Jennifer Fricks (jfricks@socialcirclega.gov) for consideration by the Scholarship Selection Committee:

- Application form (attached to this document).
- Statement of proposed career plan and/or (if applicable) plan of study.
- Official undergraduate and/or graduate transcripts.
- GRE, GMAT, LSAT score, if available (photocopy of official report is acceptable).
- Resume.
- Academic department or program head's letter of nomination.
- State of Georgia proof of residency (driver's license preferred).

The subject line of the email should read: **Annual College Scholarship Application.**

Applicant is expected to be notified by September 30, 2022, with notice of award made by October 6, 2022.



GGFOA ANNUAL COLLEGE SCHOLARSHIP APPLICATION

Personal Information:

Name: _____

Mailing Address: _____

Telephone Number: _____

Email Address: _____

State of Legal Residence (must provide proof): _____

Educational Information:

State of Georgia Accredited College or University: _____

Address of College or University: _____

Degree Sought (e.g., BA, MBA, MPA): _____

Other Colleges or Universities Attended: _____

Other Degrees: _____

Current Grade Point Average: _____

GRE, GMAT, or LSAT scores: _____

Verbal _____ Quantitative _____ Overall _____

Course of Study Data to be completed by Applicant:

1. List of all accounting and/or government finance courses you have completed since you started your current program. For each course, record the grade you received.

<u>Course Title</u>	<u>Grade</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

2. List of accounting and/or government finance courses you plan to take to complete your course of study.

<u>Course Title</u>

3. List any major papers, internships, or work experience you have completed or are working on that related to your program or career choice.

4. Attach a statement (not to exceed two typed pages, double spaced) describing your proposed career plans and plan of graduate study, if applicable. Be specific about the type of career you plan to pursue and why you chose it. Also, describe any work experience, including internships and volunteer work on projects, relative to your career choice.

5. Are you a member of the GGFOA? Yes No

6. Are you part of the immediate family (spouse, child, or other dependent) of a GGFOA member? Yes No

If yes, complete the following information:

Name of GGFOA member: _____

Address of GGFOA member: _____

Telephone number of GGFOA member: _____

Employer of GGFOA member: _____

Email of GGFOA member: _____

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