



## Channel Counties Chapter **SCHOLARSHIP APPLICATION**

Nov. 1

**Due:** Postmarked by Oct. 1

**Return to:** Rita Williams, Program Associate;  
7127 Hollister Ave., #318, Suite 25A; Goleta, CA 93117  
Fax: (805) 968-6844

**Questions?** Contact Rita at (805) 571-1558 or [rita.williams@calcpa.org](mailto:rita.williams@calcpa.org)

Thank you for applying for a CalCPA Channel Counties Chapter scholarship! The chapter will be awarding scholarships to students selected from your college-based criteria set forth below. The scholarships this year will start at \$500 and may range up to \$2,500. We look forward to receiving your completed application.

### **Eligibility:**

- Enrolled in an accounting program at a four-year university or college located in Ventura or Santa Barbara counties; a community college located in Ventura or Santa Barbara counties; or an extension curriculum in Ventura or Santa Barbara counties with 20 units completed and enrolled in the Certificate of Accounting Program;
- Grade point average of 3.0 or above in all college level accounting courses and 3.0 or above in all college course work completed in the 2011-12 academic year.

### **Submit with application:**

- Two letters of recommendation: At least one from a college professor and one from a work-related individual, if applicable, regarding the applicant's character (honesty, integrity, leadership capabilities, motivation and ability to accept responsibilities, etc.); intellectual ability and communication skills; and desire to become a CPA;
- A written essay (maximum of 250 words) describing why you have an interest in an accounting career and describing your career goals;
- A signed declaration attesting to eligibility;
- Copy of transcript; and
- Copy of résumé.

**Are you a CalCPA Member? Student Membership is FREE and we encourage you to register. Please visit [www.calcpa.org/join](http://www.calcpa.org/join) or email the following form to [rita.williams@calcpa.org](mailto:rita.williams@calcpa.org).**

Sign me up for CalCPA Student Membership

Name: \_\_\_\_\_

Email: \_\_\_\_\_

Permanent Address: \_\_\_\_\_

School: \_\_\_\_\_ Major: \_\_\_\_\_

Anticipated date of bachelor's degree (year): \_\_\_\_\_

Social Media (circle those you use):    Twitter Handle: \_\_\_\_\_

Birthday: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

If accepted for membership, I agree to abide by CalCPA's Code of Professional Conduct, [www.calcpa.org/code](http://www.calcpa.org/code). Your student membership is on us. You will not be billed.

Signature: \_\_\_\_\_



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Type or clearly print the following (please use black ink):

Name: \_\_\_\_\_ M F

Phone (\_\_\_\_) \_\_\_\_\_ Cell Phone (\_\_\_\_)

E-mail (Please print legibly): \_\_\_\_\_

Current Address (Street, City, State, ZIP):

Permanent Address (Street, City, State, ZIP): \_\_\_\_\_

Enrolled at \_\_\_\_\_

Class level or # units completed: \_\_\_\_\_

Expected graduation date: \_\_\_\_\_

GPA (Overall): \_\_\_\_\_ GPA (Accounting Field): \_\_\_\_\_

List all accounting courses completed, when taken, and the grade received:



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## **Special Recognition and/or Extra-curricular Activities**

Please list and briefly explain any activities (such as student organizations, community service, etc.) in which you have been involved during your college career and any special recognitions/awards you have received. (You may attach list on separate sheet.)

## **Work Experience for past two years, if applicable**

### **List references (please attach letters of recommendation)**

Professor(s):

Name	Title	Phone/E-mail	School

Work-related (if applicable):

Name	Company	Dates of Employment

## **Autobiographical Information**

Please explain any special or unique circumstances (including financial) which you believe qualifies you for this scholarship:

## **Essay**

Please answer the following in your essay: Why you are interested in a career in accounting? Do you have a particular career path in mind? How will this scholarship help you in your educational and professional goals?

**I attest that I meet all the eligibility requirements and that all statements and information provided in this application are complete and accurate and I understand that scholarships may be denied or withdrawn if any information reported on this application is found to be intentionally misleading or inaccurate.**

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_