GSCPA LEADERSHIP ACADEMY

NOMINATION FORM

I would like to nominate the following individual(s) for the ***2012 GSCPA Leadership Academy.***

Name: _____

Employer: _____

Address: _____

_____

Phone: _____ Email: _____

Name: _____

Employer: _____

Address: _____

_____

Phone: _____ Email: _____

Name: _____

Employer: _____

Address: _____

_____

Phone: _____ Email: _____

Name of Nominator: _____

Signature: _____

Applications will be mailed directly to nominees.

Please complete this form and return it to the GSCPA by **April 30.**

Jennifer Poff
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