

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: \_\_\_\_\_

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

Employer: \_\_\_\_\_

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

\_\_\_\_\_

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

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

Employer: \_\_\_\_\_

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

\_\_\_\_\_

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

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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

Georgia Society of CPAs

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