



**Educational
Foundation**
of the Georgia Society of CPAs

OUTSTANDING ACCOUNTING EDUCATOR AWARD

Educational Foundation
of The Georgia Society of CPAs

NOMINATION FORM

Nominee's Name

Street Address

City, State, Zip

Phone Em ail Address

Position Held (Full Description)

Previous Positions Held (include title, responsibilities and dates of service)

Degrees Earned (include degree, institution and year)

Professional Designations (CPA, CMA, etc .include dates earned)

Academic or Other Honors (include dates)

Please provide additional information concerning the nominee's teaching, leadership in professional and civic organizations, writing, speaking, curriculum development and research.

A letter of introduction and your reasons for nominating this person should accompany this nomination form along with two recommendations on behalf of your nominee.

Please send applications by
September 30, 2011 to:
Educational Foundation
Georgia Society of CPAs
Attn: Nikelle Hamada
3353 Peachtree Road, Suite 400
Atlanta, GA 30326
dcook@gscpa.org • Fax: (404) 237-1291