

REQUEST FOR MATCHING SCHOLARSHIP/SUPPORT FUNDING
Education Foundation of the Georgia Society of CPAs

MAIL TO: Education Foundation Staff Liaison
Georgia Society of Certified Public Accountants
3353 Peachtree Road NE
Suite 400
Atlanta, GA 30326

The _____ Chapter of the Georgia Society of CPAs requests matching funds in the amount of \$ _____ (for a total of \$ _____ including chapter funds) from the Education Foundation of the GSCPA.

Amount

\$ _____ To provide scholarships to accounting students who meet the Foundation's requirements.

\$ _____ To provide support to the accounting program of:

(Educational institution)

For the use or purchase of:

If these funds will result in the institution receiving other matching funds (e.g., Georgia Hope funds, grants, etc.), indicate the source of the additional match and the amount.

\$ _____ TOTAL MATCHING FUNDS

A check in the amount of \$ _____ payable to the GSCPA Education Foundation, representing the chapter portion, is enclosed. The chapter understands that all funds provided by the Education Foundation and the related matching funds provided by the chapter will be distributed to recipients who qualify under guidelines established by the Education Foundation. **The chapter will notify the Educational Foundation staff liaison, chapter members and local news of the meeting at which awarding of scholarships and support will be presented.**

Date

Chapter President

Mail check to: Name: _____
Address: _____

Chapter Scholarship Liaison (if different than person listed above):
Name: _____
Phone: _____
Address: _____

Email: _____

The deadline to submit this form is December 15, 2009 (no exceptions).