



Complete and Return Form by December 1

Contact: memberservices@gscpa.org

Please Consider This Application for:

☐ **Board of Directors** is the governing body of The Georgia Society of CPAs. Consists of the chair, chair-elect, secretary, treasurer, immediate past chair plus nine statewide directors. The secretary is a non-voting member and the position is held by the CEO of GSCPA. The nine directors are elected for two-year terms; terms are staggered for continuity. Meets minimum of six times per year; must also attend a retreat and all meetings of Leadership Council. This application is for:

☐ Chair-Elect ☐ Treasurer ☐ Statewide Director

☐ **Leadership Council** involves the leadership of the Society at all levels in the overall governance of the Society. Members-at-large serve three-year terms. Leadership council meets twice a year and members are expected to attend both fall and spring meetings.

Name: _____ Date: _____

Title and Organization: _____

Business Address: _____

GSCPA Member Number: _____ GSCPA Chapter or Member-at-Large: _____

Phone: _____ Email: _____

Area of Practice? ☐ Industry ☐ Government ☐ Education ☐ Public Accounting

☐ Law ☐ Other _____

Number of Years in the Profession: _____

Do you have a commitment from your employer for your participation? ☐ Yes ☐ No

Please list your involvement with other committees and boards outside of GSCPA:

Tell us about your professional experience and GSCPA involvement:

What strengths would you bring to the position for which you are applying?

Submit:

Mail to: Leadership Expression of Interest, The Georgia Society of CPAs
5405 Windward Pkwy, Ste 300
Alpharetta, GA 30004

Email: memberservices@gscpa.org

Questions? Member Services Department at 800-330-8889, extension 2986



**The Georgia Society
of CPAs**