



Georgia Fiscal Management Council

Graduate Scholarship Application 2015-2016 School Year

ELIGIBILITY REQUIREMENTS

1. Full or part-time graduate student.
2. A major in Accounting, Public or Business Administration, or Finance.
3. A cumulative and major grade point average of not less than 3.0 on a 4.0 scale.
4. Endorsement of application by department chairperson of your current graduate program.
5. A statement that the student intends to pursue a career in public service related to Fiscal Management or Administration.

REQUIRED INFORMATION

In order to be considered for the scholarship, the following information MUST be provided:

1. Completed application.
2. Attached form with an endorsement by the department chairperson.
3. Official college transcript sent by the college/university directly to the committee chair listed below.
4. Written description of career goals, including why you desire to work for the State of Georgia.

Submit the information above to:

Donna Stapleton
Technical College System of Georgia
1800 Century Place
Suite 550
Atlanta, GA 30345

ALL APPLICATIONS MUST BE POSTMARKED NO LATER THAN **June 15, 2015.**

Applicants will be notified of award by **August 15, 2015. Award(s) will be presented at the FMC fall dinner meeting (date/time TBD).**



Randy Trowell, President
Chad DaBella, President-Elect

GEORGIA FISCAL MANAGEMENT COUNCIL

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Nathan Deal, Governor

Student Information

Applicant Name _____ Email Address _____

Home Mailing Address _____

Home/Cell Phone _____ Work Phone _____

Academic Information

Undergraduate School _____

Major Field of Study _____

Grade Point Average _____ / _____ Date of Graduation _____

Graduate School _____

Graduate Field of Study _____

Grade Point Average _____ / _____ Anticipated Graduation Date _____

Extracurricular Activities, Honors, and Awards

Personal Essay/Statement of Goals

Please attach a description, in no more than two (2) pages, of how you envision using your degree to benefit the State of Georgia. In your write-up, describe why you want to pursue a career in state government and what your plans are upon graduation. If you are currently working for state government, please include your department, job title and length of time in state government.

Note: your application will not be considered unless this information is received.

Signature _____

Date _____



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ENDORSEMENT BY THE DEPARTMENT CHAIRPERSON AT YOUR CURRENT COLLEGE/UNIVERSITY

I have reviewed this application and recommend consideration of this student for a scholarship of up to \$1,000 from the Georgia Fiscal Management Council.

Name _____

Title _____

Department _____

Address _____

Work Phone Number _____

Signature _____