

The New York State Society of Certified Public Accountants

Foundation for Accounting Education

www.nysscpa.org



**NYSSCPA
FAE**

Excellence

2012–2013

in Accounting Scholarship

ELIGIBILITY CRITERIA AND APPLICATION

Applications must be received by the NYSSCPA by April 2, 2012

new york state society of certified public accountants

NYSSCPA|FAE

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3 park avenue, at 34th street, new york, ny 10016-5991
www.nysscpa.org

INFORMATION FOR SCHOOLS AND APPLICANT

The purpose of the Excellence in Accounting Scholarship of the New York State Society of Certified Public Accountants (NYSSCPA) and its Foundation for Accounting Education (FAE) is to provide financial assistance to encourage and aid deserving candidates to enter the accounting profession. Accordingly, scholarship awards will be based heavily on financial need. At the same time, applicants must meet or exceed a threshold of acceptable academic performance. The program is administered by the FAE, a 501(c) (3) foundation.

ELIGIBILITY REQUIREMENTS

Applicants must:

- have declared a major in accounting as described below and, if applicable, been accepted to that major.
- be residents of New York State and either U.S. citizens or permanent residents. If you are not a U.S. citizen or do not have a permanent resident visa, you are NOT eligible for a scholarship and should not submit this application.
- be enrolled at or accepted to a New York State college or university that offers an accounting program(s) registered by the N.Y. State Education Department as meeting the educational requirements for admission to the CPA examination (hereafter designated as a “Registered College”).
- have completed a minimum of 72 credit hours by April 2, 2012 and 84 credits by the start of the Fall 2012 semester. Part-time students or students whose programs have followed an irregular pattern must be at an equivalent stage. In addition, such students must have successfully completed at least one semester of the college’s intermediate accounting course(s).
- have achieved an overall cumulative grade point average of 3.0 or higher (based on a four-point system) for the above 72+ credit hours as of April 2, 2012, and maintain a grade point average of 3.0 or higher.
- have completed and filed an FAFSA application and been approved for financial aid; if you have not applied and been approved for financial aid, you are not eligible for the scholarship and should not submit this application.
- have an FAE Campus Liaison or Department Chair approval (see THE APPLICATION PROCESS).

Spring 2013 disbursement will require verification of a 3.0 GPA at the end of the Fall 2012 term.

AMOUNT AND DURATION OF SCHOLARSHIP

1. The scholarship is based upon a full year of academic study. The amount of the scholarship shall be \$2,500 for full-time study (see 2 below) and \$1,250 for part-time study payable on a term basis. Payments will be issued twice during the academic year: September and February. They will be made co-payable to the student and the school. The scholarship award will be reduced for students enrolled for less than a full year and will be based upon the terms completed. There is no provision for support for summer session courses.

2. Applicants must be enrolled for at least 12 semester credits to receive a full scholarship; applicants enrolled in six to 11.5 credits per semester shall be eligible to receive a partial scholarship; applicants enrolled for fewer than six credits are not eligible for an award.

3. Recipients must submit a renewal form to their Campus Liaison or, for schools without Liaisons, their department chair. This form will be e-mailed to Liaisons in January. The scholarship renewal is for the second semester payment only. A second year of funding is not guaranteed, though students may reapply through the regular competitive process.

4. Requests for consideration of special circumstances, such as deferral of a scholarship during a period of leave of absence, may be made to the FAE Scholarship Committee.

To learn more about the New York State Society of CPAs and programs for future CPAs, visit www.nysscpa.org. For further information, please contact Philip Federowicz by e-mail at pfederowicz@nysscpa.org.

THE APPLICATION PROCESS

Completed applications (Sections I, II, and III), on behalf of students, are accepted from a Registered College’s Campus Liaison. For a complete list of Liaisons, see www.nysscpa.org. Each Liaison may submit a **maximum of three applications** for consideration.

OR

Individual students who do NOT have a Campus Liaison may submit their completed application (Sections I, II, and III), via their department chair.

Sections I, II, and III must be submitted by e-mail to pfederowicz@nysscpa.org OR faxed to 1-866-495-1354. Section IV, Financial Aid Information, must be completed by your school’s financial aid office. They must then submit that section by mail, in a signed and sealed envelope, to the NYSSCPA/FAE Scholarship Program, Attn: Philip Federowicz, 3 Park Avenue, 18th Floor, New York, NY 10016.

The application consists of four sections: Personal Information, Personal Statements, Campus Verifications, and Financial Aid Information. Each section **must be completed in full** by the student or appropriate school representative to be eligible for scholarship consideration, and the applicant’s official transcript must be attached.

All sections of the application must be received by the NYSSCPA by April 2, 2012.

Excellence in Accounting Scholarship

SECTION I - PERSONAL INFORMATION - TO BE COMPLETED BY STUDENT

- 1) Institution attending in Fall 2012 _____ Declared major _____
- 2) Total credit hours completed by April 2, 2012 _____ at _____ Current cumulative GPA _____
Institution(s)
- 3) Are you a U.S. Citizen? Yes No If No, do you have a permanent resident visa? Yes No
- 4) Are you an NYSSCPA Member Yes No COAP Participant Yes No
- 5) Name _____
- 6) Social Security number _____ Student ID number _____
- 7) College address _____
- 8) Permanent address (if different) _____
- 9) Preferred contact telephone number _____
- 10) Preferred contact e-mail address _____

I hereby certify that the information submitted with this application is true and correct.
Additionally, I Do Do NOT authorize the NYSSCPA to publicize my name and background information as a scholarship winner.

Applicant signature _____ Date _____
Applicant's name _____

SECTION II – Personal Statements

Please type a brief response to the following questions on separate sheets of paper.

Essay

Please explain how you plan to complete the 150-hour requirement for licensure in New York state.

Extenuating Financial Circumstances

Please describe any extenuating financial circumstances that are relevant to the determination of your financial need.

SECTION III – Campus Verifications

To the Applicant: Upon completion of Sections I and II, you must submit all pages and an official transcript to your Campus Liaison or department chair for the department recommendation (below) and submission of application. If you have no Campus Liaison, please provide your department chair with the appropriate e-mail address (pfederowicz@nysscpa.org) for submission.

1. Department Faculty Recommendation. Please indicate: Student’s likelihood for success in the accounting profession:

_____ Excellent _____ Very Good _____ Good because: (You may use an additional sheet of paper if you choose.)

Campus Certification: Campus Liaison or Department Chair

I have reviewed the scholarship criteria and the information submitted here. To the best of my knowledge, this application is complete and correct.

Signature _____ Date _____

Print name _____ Title _____

Telephone _____ E-mail address _____

SECTION IV: Financial Aid Information

Print applicant's name _____

To the Applicant: Please sign the authorization below and submit this Section to your college's financial aid office for completion. They then have to mail this completed Section separately. The mailing address is below.

I hereby authorize the release of the following information to my Campus Liaison: (Campus Liaison Name and Office) _____ and the NYSSCPA FAE Scholarship committee solely for the awarding of this scholarship.
(Campus Liaison Name and Office)

Signed _____ Dated _____
(Candidate Signature)

To the Financial Aid Office:

Please make sure the student has completed his or her FAFSA and is approved for financial aid (see Part 2 below).

Once the above is signed and completed by the student, please complete parts 1 and 2 below and return this form in a signed and sealed envelope to the NYSSCPA/FAE Scholarship Program, Attn: Philip Federowicz, 3 Park Avenue, 18th Floor, New York, NY 10016, by April 2, 2012. If FAFSA information for the 2012–2013 school year is not yet available, please use information from the 2011–2012 school year.

Part 1. If this scholarship is awarded, the check should be forwarded to the following college representative/office (e.g., bursar, financial aid, or other):

Name _____ Title _____

School _____

Student's school identification number _____

Address _____

Telephone _____ E-mail _____

Part 2. Financial aid office only: Please complete the following chart. (Please use zero when needed; do not leave any field blank.)

Any comments relevant to the awarding of this scholarship are welcome.

Has the student completed his FAFSA report? Yes No If no, please contact the Campus Liaison.

Estimated Expected Family Contribution (EFC) _____

as reported on the Student Aid Report for academic year: _____

Student Budget for Year <input type="checkbox"/> 2011/12 <input type="checkbox"/> 2012/13	Amount	Estimated Financial Aid	Amount
Tuition and fees		Pell	
Books and supplies		TAP	
Personal expenses		SEOG	
Room and board (Including off-campus housing)		Subsidized Loan	
Commuting/transportation cost		Unsubsidized Loan	
Miscellaneous		Perkins Loan	
Total cost of attendance		Scholarships	
Less EFC per above		Other:	
= Total need		Total aid	
Less total aid			
= Unmet need			
Total outstanding loan balance as of April 1st			

Note: Totals in these boxes should match.

Comments:

Individual completing this form: _____ Title _____

Telephone # _____ E-mail address _____

Applicant's name _____