



Maryland Association of CPAs
901 Dulaney Valley Road, Suite 800
Towson, MD 21204

College Student Scholarship Application

Please complete and mail with other application requirements to MACPA, 901 Dulaney Valley Road, Suite 800, Towson, MD 21204-2683.

PERSONAL INFORMATION

First: _____ Middle: _____
Last: _____

1. Permanent address:

Address: _____
City: _____ State: _____ Zip: _____
Phone: _____

2. Current school address:

Address: _____
City: _____ State: _____ Zip: _____
Phone: _____

3. Date of birth: _____ Social Security number: _____

4. Race (check one): White/Caucasian Hispanic or Latino American Indian Alaskan Native
 Asian Black or African American Native Hawaiian or Other Pacific Islander Other

5. Gender (check one): Male Female

6. E-mail address: _____

7. Marital status: _____ Number of dependent children: _____

EDUCATION

1. Current (check one): undergraduate graduate
College/university: _____ Date entered: _____
Expected graduation date: _____ Expected degree: _____
Major: _____

2. Grade point average (as of application date): _____

3. Accounting courses completed:

course name: _____	credits: _____
course name: _____	credits: _____
course name: _____	credits: _____
course name: _____	credits: _____



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4. Accounting courses currently taking:

course name: _____ credits: _____
course name: _____ credits: _____
course name: _____ credits: _____
course name: _____ credits: _____
Total accounting credits earned upon completion of current semester: _____

EMPLOYMENT

1. Are you presently employed? • Yes • No
Number of hours per week during school year _____
Projected gross earnings - summer _____ Projected gross earnings - school year _____
Employer: _____
Employer Address: _____
City: _____
State: _____
Zip: _____
Phone: _____

Employer: _____
Employer Address: _____
City: _____
State: _____
Zip: _____
Phone: _____

SCHOLARSHIP | OTHER AID

1. Scholarships awarded including those covering the period of the aid requested in this application:

Source:	Dates:		Annual Amount:
	From	To	
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

2. Total dollar amount of scholarships received for the period which this application covers

EXPENSES

Current annual room, board, tuition _____