

**DEPARTMENT OF ACCOUNTING
APPLICATION FOR SCHOLARSHIP
(Print/Type All Information)**

INSTRUCTIONS

1. Complete this application form.
2. Sign this application form.
3. Obtain '**official**' transcripts from colleges attended (excluding UTA).
4. Submit this application and college transcripts to:
Chair, Scholarship Committee
Department of Accounting
The University of Texas at Arlington
P. O. Box 19468
Arlington, Texas 76019-0468

5. The deadline for submission of all materials is: **March 16 at 5:00 p.m.**

APPLICANT'S QUALIFICATIONS

- | | | |
|-----------|----------|--|
| YES _____ | NO _____ | Citizen or permanent resident of the United States. |
| YES _____ | NO _____ | An accounting major. |
| YES _____ | NO _____ | Have an accounting GPA AND overall GPA of 3.0 or higher. |
| YES _____ | NO _____ | Have completed at least 12 semester hours of accounting coursework (9 semester hours for graduate students) prior to the current Spring semester.
Note: Do not include in your accounting hours courses with an accounting prefix that serve as non-accounting electives in your degree plan (e.g., software tools, accounting for managers, etc.) |
| YES _____ | NO _____ | Have at least one semester remaining to complete your accounting degree after the current Spring semester, or be pursuing graduate study at UTA beginning in the forthcoming Fall semester. |

Note: Do not complete and submit this application unless you answered 'Yes' to all of the above questions.

APPLICANT'S UNIVERSITY STATUS

Some scholarships are available to both full-time and part-time students. Other scholarships are restricted to full-time students. Please indicate your university status for the forthcoming Fall semester.

_____ I will be a full-time student in the forthcoming Fall semester.

_____ I will be a part-time student in the forthcoming Fall semester.

Section I - Personal Information

1. Name _____
(Last Name) (First Name) (Middle Initial)
2. Address _____
(Street Address) (City) (State) (Zip)
3. Telephone (Hm) _____ (Wk) _____
(area code/number) (area code/number)
4. Email _____
(UTA Student ID Number)

Optional Information:

1. Date of Birth _____ Male _____ Female _____
2. Married: YES _____ NO _____ Children: YES _____ NO _____
3. Ethnicity:
_____ American Indian _____ Asian _____ Black _____ Caucasian (non-Hispanic)
_____ Hispanic _____ Other (explain) _____

Section II - Employment

1. Are you presently employed? YES _____ (Full time__Part Time__) NO _____
If yes, give name of employer and type of work you perform.

Section III - Education

1. Date entered UTA _____ Expected graduation date _____

Total number of hours transferred to UTA _____ GPA _____

Total accounting hours transferred to UTA _____ GPA _____

Total number of hours completed at UTA _____ Overall UTA GPA _____

Number of accounting hours completed at UTA _____ UTA ACCT GPA _____

(Note: Do not include accounting prefix courses that serve as non-accounting electives such as software tools and accounting for managers.)

Classification: Freshman _____ Sophomore _____ Junior _____ Senior _____ Graduate _____

Degree to be earned (BBA-Acct, BS-Acct, etc.) _____

Number of hours currently enrolled in this semester _____

Number of hours left to complete degree at end of this semester _____

If you receive this scholarship it can be applied to either the summer or the fall semesters.
Check one: I prefer _____ the summer semester or _____ the fall semester.

2. Name of Colleges or Universities attended other than UTA:

Dates		School	Address
From	To		
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Section IV - Scholarship(s) and Loans

Scholarship(s) and loans you now have, have applied for, or will apply for, which cover the period of the aid requested in this scholarship.

Source(s)		Dates		Status*
	From		To	
<hr/>				
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* Indicate received, applied for, or to be applied for

Section V - Awards, Honors, Activities and/or Organizations of Achievement

Section VI - Career Interests

Section VII - Why are you applying for the Scholarship?

(Please specifically address your financial need.)

1. I have furnished with this application an ‘**official**’ copy of transcripts from all colleges or universities attended (UTA excluded).
2. I agree to maintain a full-time enrollment status in the forthcoming Fall semester if I accept a scholarship that requires full-time enrollment. I also agree that if I fail to maintain a full-time enrollment status I will repay the scholarship (if the scholarship requires a full-time enrollment status).

Note: this statement does not apply to individuals who accept a scholarship that permits a part-time enrollment status.

3. I hereby affirm that the information submitted herewith is true and correct.

(Signature of Applicant)