ANNOUNCEMENT

GEORGIA FISCAL MANAGEMENT COUNCIL SCHOLARSHIPS

The Georgia Fiscal Management Council (FMC), a professional organization of State Fiscal Personnel, announces the availability of up to two $1,000 scholarships to eligible college seniors, rising college seniors or graduate students.

ELIGIBILITY REQUIREMENTS

1. Full or part-time college senior, rising college senior or graduate student.

2. A cumulative and major grade point average of not less than 3.0 (transcripts required).

3. Endorsement of application by Department Chairperson at current college/university is required.

4. A statement that the student intends to pursue a career in public service related to Fiscal Management or Administration.

5. A major in Accounting, Public or Business Administration or Finance.

DEADLINE

An application may be obtained from the FMC website (www.georgiafmc.com) or from an Agency Fiscal Officer. Deadline for receipt of application by the Georgia Fiscal Management Council is June 7, 2010. Applications should be directed to:

Kendra Mitchell, Scholarship Committee Chair

House Budget Office

Coverdell Legislative Office Building

18 Capitol Square, Room 412

Atlanta, GA 30334
STUDENT APPLICATION FOR
GEORGIA FISCAL MANAGEMENT COUNCIL
SCHOLARSHIP
2010-2011 SCHOOL YEAR

REQUIRED INFORMATION:

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

- Completed Application.
- Endorsement by the Department Chairperson of your current college/university (have chairperson complete the attached form) for either undergraduate or graduate program.
- Copy of College Transcript sent directly to the committee chair listed below.
- Written description of career goals, including why you desire to work for the State of Georgia.

Submit the information above to:

Kendra Mitchell
Scholarship Committee Chair
House Budget Office
Coverdell Legislative Office Building
18 Capitol Square, Room 412
Atlanta, GA 30334

ALL APPLICATIONS MUST BE POSTMARKED NO LATER THAN June 7, 2010.

Applicants will be notified of award by July 31, 2010. Award(s) will be presented at the FMC fall dinner meeting (date/time TBD).
STUDENT APPLICATION FOR
FISCAL MANAGEMENT COUNCIL
SCHOLARSHIP
2010-2011 SCHOOL YEAR

Date ______________________

Applicant Name ___________________________ Email Address __________________________

Home Mailing Address: ______________________________________________________________

Phone #: (Work) ___________________ (Home/Cell) ___________________

Current Employment:

Name: __________________________________________________

Address: __________________________________________________

PLEASE COMPLETE THE INFORMATION REQUESTED ON THE FOLLOWING PAGES OF THIS
APPLICATION

ENDORSEMENT BY THE DEPARTMENT CHAIRPERSON AT YOUR CURRENT
COLLEGE/UNIVERSITY IS REQUIRED – Required for both Undergraduate and Graduate
Applicants

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

SIGNATURE __________________________

NAME __________________________

TITLE __________________________

DEPARTMENT __________________________
COLLEGE SENIOR AND RISING COLLEGE SENIOR STUDENTS

APPLICANT NAME:

__________________________________________

NAME OF UNIVERSITY/COLLEGE CURRENTLY ENROLLED

_____________________________________________________________________________

MAJOR FIELD OF STUDY___________________ DEPARTMENT_____________________________

GRADE POINT AVERAGE (MAJOR) __________________________

CUMULATIVE GRADE POINT AVERAGE_____________________

ANTICIPATED GRADUATION DATE________________________

QUARTER HOURS COMPLETED___________ SEMESTER HOURS COMPLETED___________

Please complete the following if you have attended OTHER schools

GRADE POINT AVERAGE IN MAJOR COURSES AT OTHER SCHOOLS (Include Name of School):

__________________________________________

CUMULATIVE GRADE POINT AVERAGE AT OTHER SCHOOLS (Include Name of School):

__________________________________________

LIST EXTRACURRICULAR ACTIVITIES, HONORS AND/OR AWARDS:

_____________________________________________________________________________

REQUIRED: In no more than two (2) pages, describe 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.
GRADUATE STUDENTS

APPLICANT NAME ________________________________________

NAME OF SCHOOL (Undergraduate) _______________________________________

UNDERGRADUATE GRADE POINT AVERAGE, MAJOR AND DATE OF GRADUATION ______________________________

NAME OF SCHOOL (Graduate) ___________________________________________

GRADUATE STUDY FIELD _______________________________________________

GRADUATION DATE ________________________________________________

GRADUATE GRADE POINT AVERAGE ______________________________________

LIST HONORS AND AWARDS _____________________________________________

__________________________________________________________

REQUIRED: In no more than two (2) pages, describe 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 ___________________________________________________________