



M.A.P.A.
Maine Association of Professional Accountants
2016/17 Academic Year Scholarship Application

Requirements to Apply for the M.A.P.A. Scholarship
Must be a resident of the State of Maine and at least a first semester Sophomore.

A. Personal Information

Name _____ DOB _____

Permanent Mailing Address _____
Street City State Zip

Temporary School Mailing Address _____
Street City State Zip

Home Phone _____ Phone during School Year _____ Cell Phone _____

Email address _____

B. Enrollment Information

College of University Attending _____ Anticipated Graduation Date _____

Major _____ GPA Overall _____ GPA Accounting _____

As part of this application, you must submit a current Unofficial College Transcript

Please check **all** that apply (both columns):

_____ Full-time enrollment _____ Sophomore
_____ Part-time enrollment (_____ # of credits planned per semester) _____ Junior
_____ Senior

C. Applicant Information

Single _____ Married _____ Were you claimed on your parent's tax return as a dependent? Yes _____ No _____

Spouse's Occupation _____ Spousal Annual Income \$ _____

Number of Children _____

D. Parent's Information

Father's Occupation _____ Current Annual Income \$ _____

Mother's Occupation _____ Current Annual Income \$ _____

If there is additional information relevant to parents' income you believe the Association should be aware of, please indicate:

Number of brothers or sisters currently attending college Full Time _____ Part Time _____

E. Your Estimated Annual Sources of Funds Available and School Expenses

Annual Sources for Current School Year

Personal Income from Employment _____
 Loans _____
 Grants & Scholarships (explain in detail) _____

 Family contribution (allowances, etc.) _____
 Interest on savings accounts, dividends
 on stocks, income from trust fund(s) _____
 Other funds (gifts, etc.) _____

Total Funds Available \$ _____

Annual Expenses For Current School Year

Tuition _____
 Books _____
 On/Off Campus Housing _____
 Transportation Cost to/from School _____
 List any other expenses incurred for school:

Total Annual Expenses \$ _____

If working, type of position and number of hours
 During School Year _____

During Vacations or Summer Break _____

F. Personal Statement

1. Are you currently pursuing a major in accounting? Yes _____ No _____

2. Do you plan to enter the field of accounting? Yes _____ No _____

(Attachments are acceptable)

3. Why have you chosen the accounting field?

4. What are your future goals?

G. Past and Present Extracurricular Activities (High School, College, Community)

1. Please list all academic and non-academic activities, clubs, and organizations to which you belong/have belonged. Also, list all leadership positions held and indicate whether or not you are still an active member.

2. Please list any volunteer activities. Include estimated hours, level of responsibility, skills, and benefits to others.

3. Please list any honors, recognitions and awards you have received.

4. Describe any circumstances other than those already included in this application which should be considered by the Association in evaluating this application: (attach separate sheet if necessary)

H. Certification

I certify that all information provided on this application is true and complete to the best of my knowledge. I understand that withholding information or giving false information may make me ineligible for scholarships.

Signature of Applicant _____ Date _____

Note:

Please be sure to complete all sections of this form and return it by November 1, 2016 to:

Kevin Brunelle, CPA
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