

Rock Solid Scholarships

Accounting Department Scholarship Application School of Business

The Accounting Department Scholarship Program has been established with donations from its alumni, faculty, and friends. The award is to recognize excellence in academic performance. Applicants must be Accounting majors who have completed a minimum of 64 credits, including completion of Intermediate Accounting I. Applicant must be a full-time student and have at least a 3.0 cumulative GPA. Scholarship amount may vary. Last year \$2,000 was awarded.

Application deadline is 3:00 PM on Thursday, February 22, 2024. Please complete and deliver the following documents to Tammie Cramer, ECB 105.

- A completed application
- A typed letter of interest in the scholarship, including one or more paragraphs describing qualifications for this scholarship
- A current resume
- A current My Rock Audit showing the applicant's name and GPA and credits earned

Name: _____ Student ID#: _____
A0 _____

Undergraduate Major(s): _____ Minor(s): _____

Are you enrolled as a full-time student? Yes/No _____ Number of credits completed: _____ Overall GPA: _____

Expected Graduation Date: _____ Telephone/Cell #: _____

Campus address: _____

Home address: _____

Selection Process:

A committee consisting of elected members of the School of Business faculty will make the selection. If necessary, the Selection Committee shall request personal candidate interviews to determine the finalist for this award. Scholarship winners are **required** to attend the free School of Business Awards Ceremony on Sunday, April 7, 2024, and write a thank-you to the scholarship sponsor. The payment shall be made directly from the Slippery Rock Foundation, Inc. to Slippery Rock University in the recipient's name.

Yes, I give Slippery Rock University and the SRU Scholarship Selection Committee permission to use information contained in my academic records and on my financial aid application during the review of my eligibility for this scholarship. I understand that additional information may be requested from me for this application process.

Applicant's Signature _____ Date _____

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