

The Audrey Griffin Tax Education Scholarships

2021 Scholarship Application

Applicant Contact Information

Name _____

Business Address _____ Phone _____

City _____ State _____ Zip _____ FAX _____

Home Address _____ Phone _____

City _____ State _____ Zip _____ E-mail _____

Which address do you prefer we use to communicate with you? Business Home (circle one)

Are you a Georgia resident? Yes No (circle one)

Scholarship Applied For

____ National Tax Practice Institute – tuition only (Early Bird tuition rate for 2021)

Level 1 2 3 (Circle one) (Note: Scholarship can pay for one live or on-line seminar,
NOT graduate level.)

____ IRS Special Enrollment Exam (cost of one SEE Class OR one SEE study guide plus one exam fee allowance) List SEE class, location and dates or study guide/book and cost:

(NOTE: Foundation may award partial scholarships at the discretion of the board.)

Highest Years of Education Completed (check one)

____ High School or GED ____ Associate Degree ____ Graduate Degree
____ Some College ____ Bachelors Degree Major _____

Professional Background

How long have you been a tax professional? _____ Year(s) _____ Month(s)

What Degrees/Designations/Certificates Do You Hold?

____ Enrolled Agent ____ CPA ____ ATA ____ AFSP
____ Attorney ____ Accounting Degree ____ CFP ____ CSA

Are you a self-employed tax professional? Yes No

If yes, how long? _____ year(s) If no, how long with current employer? _____ year(s)

What types of tax returns do you prepare on a regular basis? (Check all that apply.)

____ 1040/A/EZ ____ 1040NR ____ 1041 ____ 940/941
____ 1120/1120S ____ 1065 ____ 706/709 ____ Other _____

Please describe any prior formal tax training received such as accounting or tax courses, basic or advanced tax schools, tax seminars, formal CPE training, etc. (Attach additional sheet if more space needed.)

Have you done any volunteer tax preparation with the IRS VITA program, AARP or another organization?

If so, please describe. _____

How may CE hours have you taken during the prior three years? _____

Have you received a tax education scholarship in the past? Yes No (circle one)

If yes, please indicate source of scholarship and purpose. _____

Applicant's Statement of Professional Goals and Need (Attach additional sheet if more space needed.)

Education Goals _____

Career & Professional Goals _____

Is your participation in the course or seminar applied for dependent upon receiving a scholarship?

Yes No (Circle one)

Please describe any circumstances of financial need this scholarship may alleviate. _____

Additional Information that you would like us to consider in reviewing your application:

Important Information

1. All sections of the application must be completed. Please print or type (neatness counts).
2. If you are applying for a scholarship for the IRS Special Enrollment Exam, please provide a letter of recommendation from a Circular 230 practitioner (Enrolled Agent, CPA or Tax Attorney) or an accounting professor.
3. Your application must be sent to the address below by **April 30, 2021** (postmark date or courier service shipping date).
4. If awarded a scholarship, you must provide a copy of the flyer or registration brochure for the course and/or study guide and a receipt or registration confirmation to document the purchase before the foundation will release the funds.

All applications are reviewed by the Board of Directors of the GAEA Educational Foundation, Inc. Decisions to award scholarships are based on the educational and professional goals and financial needs of the applicants. Notification will be mailed to the designated address on this application. Please notify the GAEA Educational Foundation if your contact information changes.

I hereby certify that all statements in this application are true to the best of my knowledge. I understand that falsification is cause for voiding this application.

Signature _____ Date _____

Submit applications to:
Chet Burgess, EA
4 Montclair Dr., NE
Atlanta, GA 30309-1527
678-772-5254
tax@cburgess.net