TXCPA Dallas Scholarship Program
Honoring Philip Vogel
Guidelines and Instructions

TXCPA Dallas promotes accounting as a career choice. An important component of this mission is to provide financial support to senior and graduate accounting students at local universities who plan to become active CPAs in the Dallas chapter area.

In 1988 the Dallas CPA Society (now TXCPA Dallas) and Philip Vogel & Company, PC established the Dallas CPA Society Scholarship Fund in memory of the Vogel firm's founder and chairman. At the time of his death, Phil was President-elect of the Dallas CPA Society and would have served as President in 1989-90. The Dallas CPA Society Scholarship Program is now the TXCPA Dallas Scholarship Program, but it is still an expression of our deep appreciation for the many contributions of Philip Vogel.

Over the last 18 years, 124 outstanding students have been selected by the TXCPA Dallas Scholarship Committee to receive over $195,000 in scholarships. This program is made possible by the generous donations of hundreds of our members over the years.

To be considered for a scholarship, a student must:

- Attend one of the following Dallas area colleges or universities: Southern Methodist University, Texas A & M-Commerce, University of North Texas, or the University of Texas at Dallas.
- Be a U.S. citizen.
- In fall of 2021, be a senior accounting major or a graduate student in accounting, with a minimum of 15 accounting credit hours through Fall 2020. Applicants may be full-time or part-time students.
- Applicants must have the intent of becoming a Certified Public Accountant and entering the accounting profession upon graduation.
- Have a minimum accounting GPA of 3.5.
- Be a TXCPA Dallas member.

Submit the following to the Scholarship Committee, TXCPA Dallas, 12400 Coit Road, Suite 750, Dallas, TX 75251, to be received by 4:00 p.m. on June 4, 2021:

- A typed or neatly printed application; signed by the chairperson of the university's accounting department.
- Electronic copy of application, emailed to scholarship@cpadallas.org
- An up to date resume or CV
- A letter addressed to the Scholarship Committee, TXCPA Dallas, explaining your need for the scholarship, why you want to become a CPA and your plans after graduation.
- Official cumulative college transcript(s) through the end of the Fall 2020 semester, to include credit hours earned from all colleges/universities and cumulative GPA. A separate official transcript must be provided for each school attended.
- Spring 2021 Grades (unofficial University grade report or official University transcript acceptable).

Incomplete or Late Applications Will Not Be Considered.
This application will be for use by TXCPA Dallas only, and is not to be transferred to any third parties, in compliance with Texas Open Records law and federal education rights and privacy act of 1974.

If you would like to receive more information on joining TXCPA Dallas as a student member, please check here: ☐

1 The TXCPA Dallas area includes the following counties: Collin, Cooke, Dallas, Delta, Denton, Ellis, Fannin, Grayson, Hopkins, Hunt, Kaufman, Lamar, Navarro, Rockwall
TXCPA Dallas Scholarship Program

(Please type or print in black ink.)

1. Name: ___________________________ ___________________________ ___________________________
   Last   First   Middle or Maiden

2. Are you a U.S. citizen? ☐ Yes ☐ No

3. Email Address: ___________________________

4. Current Address: 
   Street Address or P.O. Box ___________________________ Apartment Number ___________________________
   City ___________________________ State ___________________________ Zip Code ___________________________
   Telephone Number ___________________________

5. Permanent Address (if different): 
   Street Address or P.O. Box ___________________________ Apartment Number ___________________________
   City ___________________________ State ___________________________ Zip Code ___________________________
   Telephone Number ___________________________

 Educational Information

8. University: ___________________________

9. Classification as of End of Spring 2021 Semester (Check One): ☐ Senior ☐ Graduate Student

10. Attach official transcripts through Fall 2020 from all colleges/universities attended and unofficial transcript or university grade report for Spring Semester 2021.

11. Degree(s) Sought: ___________________________

   Expected Graduation Date: ___________________________

   Degree(s) Earned: ___________________________ Date(s): ___________________________

12. Total Credit Hours Earned Through Fall Semester 2020: _______
   Cumulative Accounting G.P.A. (Fall 2020): _______

   Total Credit Hours Earned During Spring Semester 2021: _______
   Spring 2021 Accounting G.P.A.: _______
13. List accounting courses completed (through Spring 2021) and grades received, in the order taken:

<table>
<thead>
<tr>
<th>Course Name</th>
<th>Course Number</th>
<th>Grade</th>
<th>Credit Hours</th>
<th>Grade Points</th>
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Total accounting hours
Accounting GPA

14. Total credit hours (including all subjects) for which you have been or will be enrolled during the following semesters:
   Summer 2020: ______ Fall 2020: ______ Spring 2021: ______ Summer 2021: ______
15. List additional accounting courses planned (undergraduate and graduate), including the school you plan to attend and planned timing of completion:

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<tr>
<th>Course name</th>
<th>Course Number</th>
<th>Credit Hours</th>
<th>School</th>
<th>Semester</th>
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Total hours planned
Plus: hours already completed (from above)
Number of accredited accounting hours at degree time

16. List principal extracurricular activities, organizations (indicate whether social, academic or service), college honors, and leadership positions. Attach additional sheet if necessary.

____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
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____________________________________________________________________
____________________________________________________________________
Employment

17. Expected income, Summer 2021 through Spring semester 2022: $____________

18. Give employment history (List full-time and part-time jobs, including internships, beginning with most recent job. Attach additional sheet if necessary.)

Employer: ______________________________ Supervisor: __________________

Company Address: __________________________ Telephone: _________________

Dates Employed: From_____ to______ Email Address: __________________________

Nature of Work: ________________________________

Employer: ______________________________ Supervisor: __________________

Company Address: __________________________ Telephone: _________________

Dates Employed: From_____ to______ Email Address: __________________________

Nature of Work: ________________________________

Employer: ______________________________ Supervisor: __________________

Company Address: __________________________ Telephone: _________________

Dates Employed: From_____ to______ Email Address: __________________________

Nature of Work: ________________________________

Employer: ______________________________ Supervisor: __________________

Company Address: __________________________ Telephone: _________________

Dates Employed: From_____ to______ Email Address: __________________________

Nature of Work: ________________________________

Employer: ______________________________ Supervisor: __________________

Company Address: __________________________ Telephone: _________________

Dates Employed: From_____ to______ Email Address: __________________________

Nature of Work: ________________________________
Financial Information

19. List all current and previous college scholarships awarded (if any) with most recent listed first.

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<thead>
<tr>
<th>Name of Scholarship and Organization Awarding Scholarship</th>
<th>Total Dollar Amount</th>
<th>Period(s) Covered</th>
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20. List outstanding student loans, if any:

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<th>Lender</th>
<th>Due Date</th>
<th>Dollar Amount Outstanding</th>
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Student’s Name: ___________________________
References

24. Please list three references we may contact, giving full name, occupation, complete mailing address and a telephone number where they may be reached during office hours. (Do not list relatives, students, or more than two instructors.) Please include one but not more than two professors.

(1.) __________________________________________
Name __________________________ Relationship to Applicant __________________________ Daytime Telephone Number __________________________

Occupation __________________________ Name of Company (If Applicable) __________________________

Complete Mailing Address of Reference or Firm __________________________ Email __________________________

(2.) __________________________________________
Name __________________________ Relationship to Applicant __________________________ Daytime Telephone Number __________________________

Occupation __________________________ Name of Company (If Applicable) __________________________

Complete Mailing Address of Reference or Firm __________________________ Email __________________________

(3.) __________________________________________
Name __________________________ Relationship to Applicant __________________________ Daytime Telephone Number __________________________

Occupation __________________________ Name of Company (If Applicable) __________________________

Complete Mailing Address of Reference or Firm __________________________ Email __________________________

Discussion

25. Write a paragraph on how you plan to be involved in TXCPA Dallas after graduation. Attach additional sheet if necessary.

________________________________________________________________________
________________________________________________________________________
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________________________________________________________________________
________________________________________________________________________
As chairman of the department of accounting (or comparable title), I hereby nominate this student for a TXCPA Dallas Scholarship, and acknowledge that this student is currently enrolled and in good standing:

Name ___________________________ Signature ___________________________ Date __________

Title ___________________________ University ___________________________

Email ___________________________ Telephone ___________________________