

**PENNSYLVANIA SOCIETY OF TAX & ACCOUNTING  
PROFESSIONALS  
ACCOUNTING SCHOLARSHIP APPLICATION**



**Academic Year 2024-2025**

**DEADLINE FOR APPLICATION: October 31, 2024**



# ATTENTION: *Accounting Students*

PENNSYLVANIA SOCIETY OF TAX & ACCOUNTING  
PROFESSIONALS  
AWARDING THREE SCHOLARSHIPS

PSTAP OFFERS FREE MEMBERSHIPS TO STUDENTS

[www.PSTAP.org](http://www.PSTAP.org)

Scholarship Application Deadline: October 31, 2024

Dear Student:

Thank you for your interest in the Pennsylvania Society of Tax & Accounting Professionals Scholarship! The PSTAP will award three accounting scholarships to Pennsylvania residents attending a Pennsylvania institution of higher learning for the 2024-2025 academic year. Two scholarships in the amount of \$2,000 each, and the Robert T. Zaleski Memorial Scholarship in the amount of \$3,000 will be awarded.

Eligibility Criteria:

- Applicant must be an **undergraduate student**, having completed a minimum of **60 credit hours**.
- Applicant must be a declared Accounting Major.
- Applicant must have a minimum overall GPA of **3.0**.
- Applicant must **attend a Pennsylvania college or university** and must be a **Pennsylvania resident**.
- Scholarships are given on a competitive basis to applicants who best satisfy the requirement of high academic merit. Leadership potential, extra-curricular activities and financial need may also be considered in determining the award recipients.
- Scholarships will be awarded in December and are to be used to offset the cost of the applicant's education and related expenses. Scholarship money will be dually made payable to the student and the student's college or university. Awards can be used for tuition, housing, books or related expenses.

Please complete the enclosed application and return by October 31, 2024, to PSTAP Executive Office, 150 Corporate Center Drive, Ste. 205, Camp Hill, PA 17011.

PSTAP is offering a FREE membership to all students. You can join the PSTAP online at [www.pstap.org](http://www.pstap.org). All questions should be directed to the PSTAP Executive Office at 1-800-270-3352.

Sincerely,

Sherry L. DeAgostino  
Executive Director



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**Application Instructions:**

- The following application must be received by **October 31, 2024**, in order to qualify for the scholarship. *Please note:* Incomplete applications will be disqualified.
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**IMPORTANT:** Failure to answer any of the listed questions and/or incomplete applications may constitute basis for disqualifying this application from consideration of a scholarship.

**NAME:** \_\_\_\_\_ **BIRTH DATE:** \_\_\_\_\_  
(LAST) (FIRST) (MIDDLE) mo/day/yr

**ADDRESS:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_  
(HOME) Street City State Zip ( ) ( )

**ADDRESS:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_  
(SCHOOL) Street City State Zip ( ) ( )

**Email Address:** \_\_\_\_\_

**COLLEGES(s) or UNIVERSITY ATTENDED**

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**DECLARED ACADEMIC MAJOR:** \_\_\_\_\_ **Number of Accounting Credits Completed:** \_\_\_\_\_

**Please Check One:**

Sophomore      **Accounting GPA:** \_\_\_\_\_ / \_\_\_\_\_  
(Cum) (Last)

Junior

Senior      **OVERALL GPA:** \_\_\_\_\_ / \_\_\_\_\_  
(Cum) (Last)

**Please Circle Total Number of Semesters Completed:**     3     4     5     6     7

I have enclosed my transcript(s) for the above circled semesters.

My transcript(s) will be submitted under separate cover.

**Do you plan to take the CPA Examination?** \_\_\_\_\_

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**PLEASE ATTACH THE FOLLOWING:**

- **SPECIAL HONORS, AWARDS, ETC.:** \_\_\_\_\_
  - **COLLEGE/COMMUNITY ACTIVITIES:**  
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  - **PLANS UPON COMPLETION OF YOUR DEGREE:** \_\_\_\_\_
  - **ATTACH FACULTY RECOMMENDATION:**  
\_\_\_\_\_
- 

I affirm that all the statements made in this application are true to the best of my knowledge.

\_\_\_\_\_  
**Signature of applicant**

\_\_\_\_\_  
**Date**

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