



AGA Atlanta 2025 CGFM Scholarship Application Form

PURPOSE:

The ***Certified Government Financial Manager (CGFM)*** is a professional certification awarded by AGA, demonstrating competency in governmental accounting, auditing, financial reporting, internal controls, and budgeting at the federal, state, and local levels.

The ***AGA Atlanta CGFM Scholarship*** aims to promote CGFM as the certification of choice for government accountability professionals.

PROGRAM AND APPLICABILITY:

The ***AGA Atlanta CGFM Scholarship*** program is available to AGA Atlanta Members who are CGFM Candidates. Members can receive funds to cover the costs of the CGFM examination process that would otherwise be personally borne by the applicant (including AGA Membership). The scholarship award for this program will not exceed \$1,000.00.

- ***“AGA Atlanta Members”*** are defined as active AGA Atlanta Chapter Members (including Student Members).
- ***CGFM Candidates*** are defined as those who have completed the application process and received an eligibility letter from AGA.

Please read the full requirements for this application as listed on our scholarship webpage.

REQUIRED APPLICATION DOCUMENTS:

1. AGA Atlanta CGFM Application Form
2. Copy of “CGFM Examination Eligibility Letter” provided by AGA
3. Resume
4. Letter of Recommendation
5. Copy of documentation for any costs associated with the CGFM that were personally incurred, including application fee.

Ensure you attach the Application Form (signed and dated) to the additional documents listed above. All applications and related documents must be submitted by email to scholarship@aga-atlanta.org **no later than April 18, 2025.**

The AGA Atlanta Chapter Executive Committee (CEC) will review all scholarship applications, considering each applicant's qualifications and achievements. The AGA Atlanta CEC reserves the right to make the final decision on the award recipient. Notice to award recipient will be made by May 1, 2025.



PART I – APPLICATION

Applicant Information:

Member Name: _____
 Email: _____
 Phone Number: _____ Alternate Phone: _____
 Address: _____
 City: _____ State: _____ Zip: _____

Current Employer:

NOTE: AGA Atlanta reserves the right to contact your current employer and verify your position.

Current Employer: _____
 Position: _____
 Supervisor/Manager: _____
 Email: _____
 Phone: _____

Does your current employer cover the costs of the CGFM examination Yes
 or provide reimbursement for these costs? No

Colleges and Universities Attended or Currently Attending:

School Name: _____
 Degree: _____
 Major: _____ Minor: _____

Currently attending? Yes No

If currently attending: Current GPA: _____ Anticipated Graduation Date: _____

School Name: _____
 Degree: _____
 Major: _____ Minor: _____

Currently attending? Yes No

If currently attending: Current GPA: _____ Anticipated Graduation Date: _____



Professional and Student Organizations:

Please indicate if you are a member of a professional or student organization. If you have an active role in the organization, please indicate in the space below and elaborate upon your position/duties.

- 1. _____ Active role: _____
- 2. _____ Active role: _____
- 3. _____ Active role: _____
- 4. _____ Active role: _____
- 5. _____ Active role: _____

Additional Comments:

Professional Certifications:

- 1. _____
- 2. _____
- 3. _____
- 4. _____
- 5. _____

I hereby certify that all the information on this application and on my enclosures is true and correct.

Signature

Date

AGA Atlanta reserves the right to confirm any of the above-mentioned information contained in your application.



PART II – ESSAY QUESTION:

In the space below, please describe why you believe you deserve to receive the AGA Atlanta CGFM Scholarship. How will obtaining the CGFM impact your career development? Also, explain how the CGFM will assist your organization's missions and goals.