

**DALLAS AREA CHAPTER  
ASSOCIATION OF CERTIFIED FRAUD EXAMINERS  
APPLICATION FOR SCHOLARSHIP**

**INSTRUCTIONS**

1. Complete this application form.
2. Print/Type All Information.
3. Sign this application form.
4. Obtain unofficial transcripts from colleges attended.
5. Scan in your application and college transcripts into one PDF and submit as an attachment to an email structured in the following way:
  - Subject field of your submission email must read:  
Dallas ACFE Scholarship Application - [*Insert your name here*]
  - Email to: [info@dallasacfe.org](mailto:info@dallasacfe.org)
6. The deadline for receipt of all materials is Friday March 31st, 2018 at 5:00 p.m. CDT
7. Submissions after this deadline cannot be considered

**APPLICANT'S QUALIFICATIONS**

- YES \_\_\_ NO \_\_\_ An Accounting, Auditing, or Criminal justice major.
- YES \_\_\_ NO \_\_\_ Have a major field GPA **AND** overall GPA of 3.0 or higher.
- YES \_\_\_ NO \_\_\_ Have completed at least 12 semester hours of major field coursework (9 semester hours for graduate students) prior to the current Spring semester
- YES \_\_\_ NO \_\_\_ Have at least one semester remaining to complete your degree after the current Spring semester, or be pursuing graduate study beginning in the forthcoming Summer or Fall semesters.
- YES \_\_\_ NO \_\_\_ Will be a full-time student (9 undergraduate hours or 6 graduate hours) in the next Fall semester. Or 3 hours in one of the Summer semesters.

Note: **Do not complete and submit this application unless you truthfully answered "Yes" to all of the above questions.**

**Section I - Personal Information**

1. Name: \_\_\_\_\_  
(Last Name) (First Name) (MI)
2. Address: \_\_\_\_\_  
(Street Address) (City) (State) (Zip)
3. Phone: (Home) \_\_\_\_\_ (Work) \_\_\_\_\_  
(area code/number ex:123-456-7890) (area code/number)
4. Email \_\_\_\_\_

**Section II - Employment**

Are you presently employed? YES \_\_\_ (Full time \_\_\_ Part Time \_\_\_) NO \_\_\_  
(If yes, give name of employer and type of work you perform.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Section III - Scholarship(s) and Loans**

Scholarship(s) and loans you now have, have applied for, or will apply for, which cover the period of the aid requested in this scholarship (list "Received" first).

Source(s) & Amount	Dates		Status*
	From	-- To	
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

\* Indicate: received, applied for, or to be applied for

**Section IV - Education in Your Current University**

Date entered: \_\_\_\_\_ Expected graduation date: \_\_\_\_\_

Total number of hours transferred in \_\_\_\_\_ GPA \_\_\_\_\_

Total major field hours transferred in \_\_\_\_\_ GPA \_\_\_\_\_

Total number of hours completed \_\_\_\_\_ Overall GPA \_\_\_\_\_

Number of major field hours completed \_\_\_\_\_ Major GPA \_\_\_\_\_

Classification: Freshman \_\_\_ Soph \_\_\_ Jr \_\_\_ Sr \_\_\_ Grad \_\_\_

Degree to be earned (BS Acct, BS Criminology, etc.) \_\_\_\_\_

Number of hours currently enrolled in this semester: \_\_\_\_\_

Number of hours left to complete degree at end of this semester: \_\_\_\_\_

**Section V - Awards, Honors, Activities and/or Organizations of Achievement**

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**Section VI - Career interests in the area of fraud or forensic examination. (Also indicate any involvement you may have had with the ACFE or a local chapter of ACFE.)**

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**Section VII – Please describe your involvement in the Dallas ACFE chapter.**

(For example, please specifically address whether or not you are a member, attend monthly meetings, annual conference, or any volunteer experience with our chapter.)

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**Section VIII - Why are you applying for the Scholarship?**

(Please specifically address your financial need.)

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**Do you plan on volunteering at our annual conference?** YES \_\_\_\_\_ NO \_\_\_\_\_

**Optional - Please provide one academic reference:**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

1. I have furnished with this application an unofficial copy of transcripts from all colleges or universities attended.
2. I agree to maintain a full-time enrollment status (9 undergraduate hours or 6 graduate hours) in the forthcoming Fall semester if I accept this scholarship (3 hours for the Summer semesters). I also agree that if I fail to maintain a full-time enrollment status, I will repay the scholarship.
3. I hereby affirm that the information submitted is true and correct.

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(Signature of Applicant)