



STEP 1

The Leaders' Institute Student Nomination Form

Nominations must be received by **Friday, March 19, 2010**

Instructions for completing a nomination to The Leaders' Institute:

Step 1 (Student) — The student completes “The Leaders' Institute Student Nomination Form” and submits it to the nominating educator.

Step 2 (Educator) — The educator completes “The Leaders' Institute Educator Recommendation” for the nominated student, attaches both student and educator forms and returns them before March 19, 2010, to:

Tara Pennington, Project Planner
Virginia Society of CPAs
4309 Cox Road
Glen Allen, VA 23060

Step 3 (VSCPA) — The VSCPA will mail selected students a formal invitation to the 2010 Leaders' Institute in the spring.

Requirements

- The nominated student should be a full-time student at an accredited college or university in Virginia with intent to (or with an existing) major in accounting.
- The nominated student should have demonstrated leadership potential.
- The student must have completed 60 – 120 credit hours and be enrolled in the 2010 – 2011 academic year for at least one semester.
- The nominating educator should be teaching (or have taught) the nominated student.
- The student should not have attended previous Leaders' Institute programs.

Step 1:

To be completed by the nominated student and returned to the nominating educator

Personal Information

Mr. Miss Mrs. Ms.

Name _____

Permanent address _____

City/State/ZIP _____

(over)



STEP 1

Preferred phone number cell home school

Cell phone (____) _____

Home phone (____) _____

School phone (____) _____

The Leaders' Institute is a summer residential program taking place June 25–27, 2010, at The Inn at Virginia Tech and Skelton Conference Center. Help us keep in touch with you during the school year and over the summer by providing an e-mail address you have access to year-round.

Also, since The Leaders' Institute is a residential program, please help us make appropriate rooming assignments and accommodate your needs by providing your date of birth, gender and any special dietary or physical needs.

Preferred e-mail _____

Date of birth _____

Gender: male female

Special dietary or physical needs _____

School Information

College or university _____

Mailing address while at school _____

City/State/ZIP _____

Number of credit hours completed _____

GPA _____

Year of graduation _____