

GSCPA LEADERSHIP ACADEMY  
**NOMINATION FORM**

I would like to nominate the following individual(s) for the *2010 GSCPA Leadership Academy*.

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

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

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

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

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

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

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

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

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

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Name of Nominator: \_\_\_\_\_

Signature: \_\_\_\_\_

*Applications will be mailed directly to nominees.*

Please complete this form and return it to the GSCPA by **February 1, 2010**.

Don Cook  
Georgia Society of CPAs  
3353 Peachtree Road NE, Suite 400  
Atlanta, GA 30326  
404-504-2935 \* Fax: 404-237-1291  
dcook@gscpa.org