

Petroleum Accountants Society of the Permian Basin Scholarship

The Petroleum Accountants Society of the Permian Basin (PASPB) was established in 1954 and became a member of the Council of Petroleum Accountant Societies (COPAS) in April 1961. Both are non-profit organizations that analyze accounting problems, formulate practices and issue guidelines and procedures for the petroleum industry.

PASPB and COPAS objectives include assistance to educational institutions through the contribution of speakers, books and scholarships. Education and professional development have always been vital programs of both organizations.

Through the generosity of the members of PASPB, a scholarship program has been established to assist area accounting students in their educational endeavors by providing funds applicable to tuition, fees or books for an entire scholastic year.

A scholarship committee reviews the applications, interviews the applicants as needed and recommends the recipients to the PASPB Board of Directors. Scholarships are awarded in April each year by the Board of Directors. The number of scholarships awarded each year is dependent on available funds

The organization does not discriminate because of race, color, religious creed, national origin, sex or age.

Applicants Must:

- Major in the field of accounting.
- Submit a completed application.
- Submit high school or college transcript(s).
- Be available for an interview.

Considerations for the receipt of the scholarship include financial need and GPA based on course load and work demands.

To apply, simply complete the attached form and mail to the address indicated. You will receive an application form by return mail.

***Application deadline:
February 15, 2008***



APPLICATION FOR ACCOUNTING SCHOLARSHIP

This application must be returned to PASPB, PO Box 1123, Midland, TX 79702-1123 by February 15, 2008. **Please submit this application along with all college or high school transcripts. If you have hours from multiple colleges, please submit transcripts showing all hours completed.** This organization does not discriminate in awarding scholarships because of race, color, religious creed, national origin, sex or age. No question on this application is intended to secure information to be used for such discrimination. For additional information please contact Diane Roberts at 432-571-3178 or email at diane.roberts@pxd.com.

PERSONAL INFORMATION:

Please answer every question.

Name: _____ Date: _____

Address: _____ S.S. #: _____

Town/State/Zip _____

Phone # (home) _____ (work) _____

What prompted your application? Referral _____ College Agency _____

Referred to P.A.S.P.B. by: _____

Relationship to above reference _____

Amount Requested: _____

Subjects financing requested for _____

Which college/university do you plan to attend or attending? _____

What is your major? _____ What degree will you attain? _____

How many hours do you need to receive your degree? _____

What are your scholastic goals? (full/part time student, date of graduation, etc.)

What are your employment goals after graduation? _____

Have you applied for other scholarships? Yes _____ No _____

SCHOLASTIC INFORMATION:

High School attended/graduated: _____

Additional High School attended: _____

College attended/attending: _____

Additional College attended: _____

High School G.P.A. _____ Scale _____

College G.P.A. _____ Scale _____

Courses, workshops, seminars, or other specialized or advanced training received:

Memberships, activities, positions of leadership in school, civic, community, or special interest groups (excluding any organization in which the name or character of which may reveal race, religion, or national origin of its members): _____

EMPLOYMENT:

Name of employer: _____ Supervisor: _____

Location employed: _____ Your title: _____

Dates of employment: _____ Salary: _____

Reason for leaving: _____

If still employed, may we contact your supervisor? _____

Describe your principal responsibilities. _____

Previous employment:

Name of employer: _____ Location: _____

Dates of employment: _____ Position: _____

Person to contact: _____

Name of employer: _____ Location: _____

Dates of employment: _____ Position: _____

Person to contact: _____

REFERENCES:

List names, addresses, and phone numbers of three persons familiar with your work or academic background:

- (1) _____

- (2) _____

- (3) _____

ADDITIONAL INFORMATION:

Have you been convicted under any criminal law within the past 5 years (excluding minor traffic violations)? Yes _____ No _____

If yes, please give details _____

Reasons for considering you for the P.A.S.P.B. scholarship:

The answers and statements set forth above in my application for scholarship are true and complete. I understand that if awarded, false statements on this application shall be considered sufficient cause for revocation of scholarship. You are hereby authorized to make an investigation of my personal history, financial records, and credit records through any investigator or credit agencies or bureaus of your choice. In making this application for scholarship I also understand that an investigative consumer report may be made whereby information is obtained through personal interviews with my neighbors, friends, or others which whom I am acquainted. This inquiry includes information as to my character, general reputation, personal characteristics and mode of living. I understand that I have a right to make a written request within a reasonable period of time to receive additional, detail information about the nature and scope of this investigative consumer report.

PLEASE READ THE ABOVE STATEMENT BEFORE SIGNING THIS APPLICATION

APPLICANT'S SIGNATURE

DATE

PLEASE SUBMIT THIS APPLICATION ALONG WITH ALL COLLEGE OR HIGH SCHOOL TRANSCRIPTS.

**DRUG AND CONTROLLED SUBSTANCE SCREENING TEST
CONSENT:**

I hereby give my voluntary consent for a urine sample to be collected from me and submitted for a drug and controlled substance screen test, **if requested**. Further, I hereby consent to the release of the test results to the P.A.S.P.B. for its use. I understand that any positive result may preclude my consideration in this application.

APPLICANT'S SIGNATURE

DATE