

**OAKLAND UNIVERSITY**  
**Personal Financial Planning Program Scholarship Application – 2018**

A Scholarship fund has been established through Oakland University's Professional and Continuing Education (PACE) unit as follows:

Tuition assistance to individuals seeking to complete the Certified Financial Planner educational program and to become a certificant eligible to sit for the Certified Financial Planning Exam and authorized by the Certified Financial Planning Board of Standards.

Scholarship application criterion:

**Requirements for Executive Program Scholarship:**

- 1) Candidate must have a minimum of 2-3 years in the financial industry, including accounting, investments, brokerage, tax, insurance, banking, etc.
- 2) Candidate must maintain at least a 3.0 grade in the program.
- 3) Candidate must **not** already be covered in a company tuition reimbursement program.
- 4) Candidate must register/or commit to enrollment in the full year executive program\* (will be applied to PFP 37300 Financial Plan Development course)
- 5) Candidate must submit a 500-word essay on why they wish to become a CFP certificant.

Companies that donate to the scholarship fund will receive full credit and may include their logo on the application form. Individuals may also be listed if desired.

Continued

## Personal Financial Planning program (PACE) Scholarship Application Form

Please complete application and submit with required essay.

### Personal Information:

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home/Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

Position: \_\_\_\_\_ Date Started: \_\_\_\_\_

### Academic Information:

College Attended: \_\_\_\_\_

Date Graduated: \_\_\_\_\_ Degree Obtained: \_\_\_\_\_

Other Degrees, Licenses or Certifications: \_\_\_\_\_

\_\_\_\_\_ I agree to register for the full 6 classes in order to qualify for this scholarship.  
(Initial)

\_\_\_\_\_ My company does not offer a Tuition Reimbursement Program.  
(Initial)

I certify that the statements herein are true to the best of my knowledge and grant my permission for the information contained herein to be shared with the scholarship selection committee and scholarship donors.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

PLEASE RETURN TO LORI OANCEA at [lorioancea@oakland.edu](mailto:lorioancea@oakland.edu) by January 31, 2018 deadline.