



UNIVERSITY OF
GEORGIA
Carl Vinson
Institute of Government



PUBLIC FINANCE LEADERSHIP ACADEMY

(PFLA runs from October 2024 through May 2025)

APPLICATION

(Deadline to apply is September 1st, 2024)

PURPOSE

To equip new and emerging public sector financial management leaders with the knowledge they need to successfully manage the fiscal affairs and activities of a local government.

CONTACT INFORMATION

Applicant First and Last Name: _____

Local Government Employer: _____

Business Address

Street: _____ City: _____ ZIP: _____

Business Email Address: _____

Business Phone Number: _____

Personal Phone Number: _____

EMPLOYMENT INFORMATION

Current Job Title: _____

Years in Current Position: _____

Current Job Duties:

PREVIOUS EXPERIENCE

Employer's Name	Beginning Date	Ending Date

EDUCATIONAL BACKGROUND

Level of Education

- | | |
|--|-----------------------|
| <input type="checkbox"/> Graduate Degree | Year Graduated: _____ |
| <input type="checkbox"/> Bachelor's Degree | Year Graduated: _____ |
| <input type="checkbox"/> High School | Year Graduated: _____ |

PROFESSIONAL INFORMATION

- | | | |
|------------------------------|------------------------------|----------------------------------|
| Level I Completion | Level II Completion | Professional Designations |
| <input type="checkbox"/> Yes | <input type="checkbox"/> Yes | <input type="checkbox"/> CPA |
| <input type="checkbox"/> No | <input type="checkbox"/> No | <input type="checkbox"/> CPFO |
| Professional Organizations: | | <input type="checkbox"/> CGFM |

Roles in Professional Organizations:

Professional Awards and/or Recognition:

APPLICANT ESSAY

Why do you want to participate in this program?

What do you hope to gain by completing this program?

Required Signatures

Supervisor - I certify I am the supervisor for the applicant and will allow sufficient time from work to complete the program.

_____ Date: _____

Applicant - If chosen for the Public Finance Leadership Academy, I understand that I am responsible for the \$2,799 registration fee and will be able to attend all sessions.

_____ Date: _____

Please attach the following documents to this application to be considered for the program:

- A current chronological resume
- At least one letter of support/approval for participation from current manager/supervisor or city or county leader

Send completed application and attachments to:

John Hulsey at jhulsey@uga.edu OR to
UGA Carl Vinson Institute of Government
2530 Sever Road, Suite 100, Lawrenceville, GA 30043

Do not send tuition with this application. You will receive an email indicating if you have been accepted into the program with further instructions for registering and paying tuition.