



Wisconsin NATP Chapter Scholarship Requirements

The Wisconsin Chapter of NATP will provide financial support (\$250) through its Scholarship Program to Wisconsin NATP members or those becoming NATP members to pursue accreditation as an Enrolled Agent. These scholarships will be provided as available based on monetary balances in the scholarship fund.

Checks will be given to the chosen applicant(s) after taking the Enrolled Agents Test Preparation Seminars offered by NATP (you will need to provide a receipt indicating that you have completed the seminar).

You may be eligible for the scholarship if you meet the following requirements:

1. Must be a legal US citizen and Wisconsin resident
2. You are an active member of the National Association of Tax Professionals (NATP) – Wisconsin Chapter, or are becoming a member.
3. You have been, or are currently a tax professional, accountant, attorney, or financial planner.
4. Your application is received by the deadline (July 1st of each year)

Applications will be reviewed by the scholarship committee to choose the successful candidates to receive a scholarship. All applicants will be notified whether successful or not via mail. Successful candidates will be recognized at the Wisconsin NATP fall conference.

Directions:

Complete the application and mail it (all pages) to:

Terrance J Ostrander, CRPC, CFS, CTS
Scholarship Committee Chair
Lakeshore Investment & Tax Service
4400 Calumet Ave
Manitowoc, WI 54220

Wisconsin NATP Chapter Scholarship Application

Name: _____

Address: _____

Phone: _____

Email Address: _____

NATP Member Number: _____

Have you ever served on the Board or a committee of NATP? Yes No

If yes, list: _____

Do you work full time or part time as a tax professional?

Where do you work: _____

Address: _____

List two people who would serve as a reference (one character, one work or academic)

1. Name: _____

Phone: _____

2. Name: _____

Phone: _____

I authorize the verification of the information provided on this application as to my employment and other information provided.

Signature: _____

Date: _____

