

Guaranteed Accounting Program (GAP4+1) Program Application – Current Students

Last Name: _____ First Name: _____ MI: _____

IVC College Student ID# _____ Current GPA: _____ DOB: _____

Address: _____ City: _____ Zip Code: _____

Phone #'s: Home: _____ Cell: _____

IVC Email: _____

Did you take any Advanced Placement (AP) exams in High School?

YES ☐ NO ☐

Please list the AP subject(s) and score(s), if it's a score of 3 or higher: _____

Please attach the following documents to your application:

- IVC Transcript or other college transcripts (if applicable)
- Letter of recommendation from accounting professor or another instructor/counselor (option to be emailed directly)
- Response to the following writing prompt (Maximum 1 page, 12-point font)
 - **Why should you be selected for the GAP4+1 Program at CSUF/IVC? If selected, what do you plan to do to ensure successful completion of the program? Is there anything you would like to add or highlight about yourself?**

I understand, that to be a part of this program, I will need to: **(Please Initial)**

_____ Be eligible for Writing 1 (College Writing) and Math 11 (Business Calculus) or Math 3A (Calculus)

_____ Maintain a cumulative college GPA of at least 3.25 and a major GPA of at least 3.0 or maintain a major GAP of at least 3.25 major GPA and a cumulative GPA of at least 3.0.

_____ Commit to fully participate in the GAP4+1 Program full-time with 12 or more units

_____ Fully participate in the required co-curricular activities, including tutoring, GAP4+1 cohort meetings, Meet the Firms, field trips and other GAP4+1 events, which include blocking Fridays until 1:00 p.m. or later.

_____ (Optional) Become a CSUF Beta Alpha Psi Initiate which includes paying a fee of \$30.00 per semester during your first year at IVC and \$40.00 per semester during your second year at IVC.

_____ I also understand, as a GAP4+1 student, if I cannot provide documentation per the Immigration Reform and Control Act of 1986, Public Law 99-603 (which requires that employers obtain documentation from every new employee authorizing that individual to accept employment in the 50 United States and the District of Columbia), I will have limitations acquiring internships, externships, external scholarships, and job opportunities in the USA. Such limitations also apply to F1 Visa students.

Student Signature: _____ **Date:** _____

Parent Signature: _____ **Date:** _____

I certify that the above statements are true and complete to the best of my knowledge. I also understand that any falsification on my part will result in not being admitted into the GAP4+1 Program. Acceptance to the program is contingent upon assessment.