



What is ACAP?

Accounting Careers and Awareness Program (ACAP) is a nonprofit organization. ACAP was developed in 1980, when Mel Minnis and Ron Leveret became concerned about the small proportion of minorities entering the accounting field. After recognizing that preparation for a business career should begin during a student's high school years, they decided to design a pilot program that would encourage minority students to take the college preparatory courses they would need to major in accounting and other fields of business. This idea has now spread to 23 other National Association of Black Accountants, Inc. (NABA) chapters across the US.

What is ACAP Residency Week?

ACAP Residency Week is a one-week motivational and educational program held annually at a local university. Students are introduced to accounting, finance, economics and management through a customized curriculum involving guest lecturers from the business community. Students selected for the residency week will pay no cost to participate in the program. The costs are covered by our sponsors. This program will be held at the University of Central Florida (UCF). Students will live on campus (stay in UCF housing) each night of the camp.

The Greater Orlando Chapter ACAP Residency Week will be July 12 – July 17, 2020 (A mandatory orientation session will be held on May 16th at 11 am at UCF for selected students and their parents)

Who is eligible for ACAP Residency Week?

ACAP is open to Florida minority high school students that will be juniors or seniors by fall 2020, with a minimum unweighted GPA of 2.8.

What are the benefits of ACAP Residency Week?

- Prepares students to pursue higher education (college application process, FAFSA, scholarships)
- Informs students about the career opportunities available in accounting, finance, and business
- Teaches skill sets relevant to the field of business (interview skills, resume building, dining etiquette)
- Connects students with business professionals and mentors

How do I apply for ACAP Residency Week?

Mail or e-mail your application with the following supplemental materials:

1. Personal cover letter describing your college and career aspirations. *(Please limit answer to 500 words)*
2. Recommendation letter completed by a teacher or guidance counselor.

Note: There will be a non-refundable \$25.00 registration fee for students who are accepted into the program. If accepted, please make checks payable to NABA Greater Orlando and bring with you to the mandatory orientation session.

How did you hear about the program?

- Teacher or Counselor
- NABA Email
- Other _____

ACAP Residency Week Application

(Applications are due by April 8th)

Via email: nabaorlando.acap@gmail.com. If unable to send via email, please contact NABA member Linda Howard at 321.239.1015

Please Type or Print Neatly:

Name: First	Middle	Last
Address:		
City:	State:	Zip code:
Student Telephone:		Parent Name:
Student's Email:		Parent Telephone:
		Parent Email:
Background: (Check all that apply)		
Race and/or Ethnicity <input type="checkbox"/> Hispanic or Latino (<i>includes Mexican, Puerto Rican, Cuban, South or Central American</i>) <input type="checkbox"/> African-American or Black <input type="checkbox"/> American Indian or Alaska Native – <i>Tribal Affiliation</i> _____ <input type="checkbox"/> Asian <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> Other (specify) _____		Sex <input type="checkbox"/> Male <input type="checkbox"/> Female DOB: _____
Grade Level _____ High School Grade Point Average (Unweighted GPA) _____ Name of High School _____ High School Phone Number: _____		Expected major in college _____ List extracurricular activities:

Include the following with application:

- 1. Personal cover letter describing your college and career aspirations. (Please limit answer to 500 words)**
- 2. Letter of recommendation. See Guidelines**

Student's signature: _____ Date: _____

I, _____, give permission for my child to participate in the program if selected.
 Print Parent/Legal Guardian Name

Parent/Legal Guardian Signature: _____ Date: _____

RECOMMENDATION LETTER GUIDELINES

Each application should include a recommendation letter. The letter must be written by the applicant's teacher or guidance counselor. The purpose of this letter is to gather additional information on the applicant to determine which students will be best served by the program. Please include any other comments that would help in the evaluation of this applicant for acceptance in the ACAP Program, including discussion of the student's character, career aspirations, extracurricular activities, etc. Attach additional pages if necessary. Please make sure your letter includes the following on the cover page

Applicant's Name: _____ School _____ Grade _____

How long have you known the applicant? _____

Please Print Name: _____ Title: _____

Please Sign Name: _____ Date: _____

We appreciate your assistance in completing this application. Please return the recommendation letter as soon as possible to the student or the ACAP program by mail or e-mail (see below). The student's application will not be complete until this recommendation letter is received.

Key Dates:

April 8, 2020 – Application Must be Received by this Date

April 30, 2020 – ACAP Residency Week Selection Deadline

May 16, 2020 – Mandatory orientation meeting for selected students and parents/legal guardians