



application SUMMER 2021

Part I - General information

Last name: _____ First, M.I.: _____

Mailing address: _____

City, state, zip: _____

Home phone: _____ Cell: _____ Email: _____

How did you hear about our internship program? _____

Have you applied to our firm before? Yes No If so, when? _____

Opportunities are available in three of our offices. Please select one: Buffalo Batavia Rochester

Part II – Education

PLEASE CHECK ONE:

I will be graduating with a Bachelor's Degree and the necessary 150 credit hours in accounting in order to be CPA-eligible.

OR

I will be graduating with a Bachelor's Degree but will attend Graduate School to receive an MBA / MS / 150 credit-hour requirement in order to be CPA eligible.

Do you intend to become a CPA? Yes No

> UNDERGRADUATE

Undergraduate school: _____

Expected graduation date: _____

Overall GPA: _____ Accounting GPA: _____

(A minimum of 3.3 GPA in Accounting is required for our program.)

> GRADUATE

Graduate school: _____

Expected graduation date: _____

Overall GPA: _____ Accounting GPA: _____

(A minimum of 3.3 GPA in Accounting is required for our program.)



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Part III – Essays

Please complete one essay for each topic below. Each essay should be a minimum of 200 words. Attach your essays to this form.

- 1) What are your long-term career goals and why?
- 2) What makes Freed Maxick different from national firms?

PART V – Resume

Please include a resume with this application.

PART VI – Transcript

Please include a transcript with this application; transcript can be unofficial / student copy.

PLEASE READ CAREFULLY BEFORE SIGNING.

I understand that proof of identity, citizenship or immigration status and the completion of a successful background check will be required upon employment.

I certify that any information given during the course of applying for an internship is true and complete to the best of my knowledge. I understand that misrepresentations, omissions or falsified statements on this application or during the application process may be justification for refusal or termination of internship.

I authorize this company to thoroughly investigate my entire former employment history and other references, and to verify all data given in my application, related papers, or oral interviews. I release this company and all affiliated entities and all informants of all liability whatsoever resulting from such investigations.

I understand that this internship application and any related company documents are not contracts of employment.

I understand that this is an application for an internship and that no employment is being offered. I further understand that if I am granted this internship, my time with the Firm will be at-will and can be terminated by the Firm or me at any time, for any or no reason. The Firm is free to change wages, benefits and conditions of the internship at any time.

Signature: _____ **Date:** _____

Only completed applications with all materials enclosed will be considered.

Now accepting completed applications through September 30, 2020.

MAIL:

Julie Becht, Chief Human Resources Officer
Freed Maxick CPAs, P.C.
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Buffalo, NY 14202

EMAIL:

career@freedmaxick.com
Subject line: MAX Program application