2020/2021 SCHOLARSHIP APPLICATION
This scholarship application can also be downloaded at www.nmrestaurants.org

PURPOSE
The Hospitality Industry Education Foundation (HIEF) is dedicated to providing scholarships for students who are pursuing an education and career in the foodservice industry.

ELIGIBILITY CRITERIA
☐ Applicants must be a citizen or permanent resident* of the United States of America. Preference will be given to NM residents.

☐ Applicants must be accepted and plan to enroll in a U.S. accredited college, culinary school, or university.
  o Enroll as a full-time student taking a minimum of 12 credit hours each term.
  o Major in culinary, restaurant management, or other foodservice related major.
  o Plan to remain in school for at least two consecutive terms.
  o GPA 2.5 minimum

☐ Applicants must submit the following:
  o Signed and completed application
  o Three letters of reference on school or company letterhead
  o Three completed Character Reference Forms
  o Current official transcript
  o Essay (500 words minimum, typed, double spaced)

☐ Applications must be completed and postmarked by June 14, 2020. Late applications will not be accepted. Faxed applications will not be accepted. Do not staple or bind application in any way.

PARTICULARS
☐ The scholarship is to be used toward the pursuit of a certificate or an undergraduate degree at an accredited post-secondary institution.

☐ Scholarships are disbursed DIRECTLY to the educational institution only after the HIEF office receives verification from the institution’s records/admissions office confirming full-time enrollment for the student.

☐ Recipients will be recognized at the annual Hospitality Industry Awards Ceremony. Recipients will be notified of date and location of the event via email.

☐ The Hospitality Industry Education Foundation Scholarship Committee will determine the number and value of scholarships to be distributed each year.

☐ HIEF reserves the right to make exceptions based on circumstance.

☐ This is a merit based scholarship, judges will score on the following:
  o Presentation of application (spelling, punctuation, etc.)
  o Strength of letters of recommendation
  o Essay (well written and within word count)
  o Industry related work experience
  o Grade point average

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* Permanent Resident Alien: Any person not a citizen of the United States who is residing in the U.S. under legally recognized and lawfully recorded permanent residence as an immigrant. Also known as a resident alien permit holder and green card holder.
SCHOLARSHIP APPLICATION

PERSONAL INFORMATION

All scholarship correspondence will be mailed. Please provide the address and phone number where you can be contacted. Please type or print clearly.

Last Name _______________________ First Name ____________________________ Middle Initial _____

Permanent Address _______________________________________________________________________

City ____________________________________ State _________________________ Zip ______________

Phone Number (____)______________________ Work Number (____)______________________________

Email Address _____________________________________________ Date of Birth ___________________

U.S. Citizen or Resident? □ Yes □ No   New Mexico Resident? □ Yes □ No   Sex: □ Male □ Female

*Ethnicity? □ African American □ Asian American □ Caucasian □ Hispanic □ Native American □ Other
*You may supply this information voluntarily. HIEF administers an equal opportunity scholarship program.

Parent or Legal Guardian Name____________________________________________________________

Phone Number (Home)_______________________ (Work) _______________________________________

SCHOLARSHIP/PROSTART INFORMATION

Must be completed by all applicants.

Are you a ProStart Certificate of Achievement holder? □ Yes □ No

If yes, Certificate #____________________________

Are you a graduate or graduating senior of the ProStart program? □ Yes □ No

Have you applied for a scholarship through the National Restaurant Association Educational Foundation (NRAEF)? □ Yes □ No

If yes, were you awarded the scholarship? □ Yes □ No

□ Have not yet received notice

Have you been awarded or are you being considered for any other scholarships at this time? □ Yes □ No

If yes, which scholarship(s)? ___________________________________________________________

Have you received a NMRA scholarship in the past? □ Yes □ No

If yes, what year(s)? _______________________ Amount of Award? _____________________
SCHOOL INFORMATION

A. Current Information
School Name ____________________________________________________________________________
Address of Financial Aid Office _____________________________________________________________
City____________________________________ State _________________________ Zip ______________
Financial Aid Office Phone Number (_____)___________________________________________________
Required date of funding at the institution _____________________________________________________
Expected Graduation Date __________________________________________________________________
Major ___________________________________________ Cumulative GPA ________________________
Next term I will be a:    □ Freshman     □ Sophomore      □ Junior      □ Senior
at a:    □ 2-yr College     □ 4-yr College     □ Culinary Arts Program
I plan to pursue/receive a: □ Certificate □ Associate’s Degree □ Bachelor’s Degree

B. Future Information (only if different from above, and have been enrolled in new school)
School Name ____________________________________________________________________________
Address of Financial Aid Office _____________________________________________________________
City____________________________________ State _________________________ Zip ______________
Financial Aid Office Phone Number (_____)___________________________________________________
Required date of funding at the institution _____________________________________________________
Expected Graduation Date __________________________________________________________________
Major __________________________________________________________________________________
I plan to pursue/receive a: □ Certificate □ Associate’s Degree □ Bachelor’s Degree

ACADEMIC HONORS & ACHIEVEMENTS (Optional)
Include only those activities and honors received during the past two years.
Academic Honors _________________________________________________________________________
______________________________________________________________________________________
Offices or Leadership Positions Held (date, organization, position) ________________________________________
______________________________________________________________________________________
Extracurricular Activities or Awards __________________________________________________________
______________________________________________________________________________________

ESSAY
Please submit an essay explaining the following: your reason(s) for applying for a scholarship and why you
feel you should receive one, the type of career in the foodservice or hospitality industry you plan to pursue,
and your future goals. Your response should be at least 500 words, typed and double-spaced.
### SCHOOLS ATTENDED

Please list in order beginning with most recent. Reminder: You must include an official transcript with your application from current school.

<table>
<thead>
<tr>
<th>School Name</th>
<th>City, State</th>
<th>Dates Attended</th>
<th>Degree Earned</th>
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</table>

### HOSPITALITY INDUSTRY WORK EXPERIENCE

List paid or voluntary hospitality industry work experience. ONLY include hospitality related work experience, listing the most recent experience first.

<table>
<thead>
<tr>
<th>Company Name, City, State, Telephone Number</th>
<th>Type of Business and Position</th>
<th>Date(s) Employed</th>
<th>Average Hours Worked per Month</th>
<th>Total Months Worked</th>
<th>Total Number of Hours*</th>
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*To calculate total hours, multiply average hours worked per month by total months worked.

Total Hours Worked: ________
CHARACTER REFERENCES

Please identify three people who will complete the character reference forms enclosed and your letters of reference. These references must be from 1) your advisor, 2) employer, and 3) a teacher, educator, etc. No relatives please.

Name __________________________ Title __________________
Name __________________________ Title __________________
Name __________________________ Title __________________

FINANCIAL INFORMATION

Expenses for one academic year:
School: ☐ In-State ☐ Out-of-State ☐ Private
Annual Tuition ________________ Fees, Books, Supplies, Uniforms (estimate) ________________

REQUIRED SIGNATURE

How did you learn about this scholarship?
☐ Professor/School ☐ Internet ☐ Mailing ☐ Employer ☐ Other ________________

Please read prior to signing.
I hereby certify that the information in this application is true and accurate to the best of my knowledge. I agree to report to the Hospitality Industry Education Foundation any changes which could affect consideration of my application. I understand that failure to provide valid and complete information could result in the withdrawal of financial assistance and recall any and all awards previously made by HIEF. Furthermore, I understand that the decisions made by the Hospitality Industry Education Foundation Scholarship Committee are final.

Signature of Applicant __________________________ Date __________________
Signature of Parent or Guardian __________________________ Date __________________
(only if applicant is under 18 years of age)

Applications must be postmarked no later than June 14, 2019 to qualify. An incomplete application will not be accepted. Notification will be made to all applicants by July 31, 2019.
If you have any questions, please call Brianna at 505-343-9848.

Submit application to:
Hospitality Industry Education Foundation
9201 Montgomery Blvd NE Suite 602
Albuquerque, NM 87111
CHARACTER REFERENCE FORM
FOR SCHOLARSHIP APPLICANT

__________________________________________ has applied to the Hospitality Industry Education Foundation for a scholarship. The Scholarship Committee has requested that you complete this Character Reference Form. Please rank the applicant in each of the following areas:

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<td>Work Record</td>
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<td>Balance of Activities</td>
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How long have you known the applicant? ____________________________________________________________

Are you related in any way? _____________________________________________

Are you acquainted with the applicant’s financial need in this instance? ______________________________

Is the applicant’s financial need:

- [ ] Great
- [ ] Moderate
- [ ] Small
- [ ] Unknown

Would you recommend the granting of a scholarship to this applicant?

- [ ] Yes
- [ ] No

Signature: ___________________________________________ Date: ______________________________

Name (Print): ____________________________________________

Address: ________________________________________________

City: ________________________ State: _____ Zip: ________ Phone: (___)__________

A letter of reference is required to accompany this Character Reference Form. Please do not staple the letter to this form. Please provide any information that you feel will help the Scholarship Committee in their decision.

NOTE: This form and a letter of reference must accompany the entire application packet in order for the applicant to qualify for a scholarship. Thank you for your assistance.
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Are you acquainted with the applicant’s financial need in this instance? __________________
Is the applicant’s financial need:

☐ Great  ☐ Moderate
☐ Small  ☐ Unknown

Would you recommend the granting of a scholarship to this applicant?

☐ Yes  ☐ No

Signature: ______________________________ Date: ______________________________

Name (Print): ______________________________

Address: ______________________________

City: ___________________________ State: _____ Zip: ________ Phone: (____)__________

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Signature: ____________________________ Date: ____________________________

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