Hospitality Industry Education Foundation

2025/2026 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.
  - Enroll as a full-time student taking a minimum of 12 credit hours each term.
  - Major in culinary, restaurant management, or other foodservice related major.
  - Plan to remain in school for at least two consecutive terms.
  - GPA 2.5 minimum

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

- **Applications must be completed and postmarked by June 6, 2025. 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:
  - Presentation of application (spelling, punctuation, etc.)
  - Strength of letters of recommendation
  - Essay (well written and within word count)
  - Industry related work experience
  - Grade point average

** 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.*

Hospitality Industry Education Foundation

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 Degree □Bachelor's Degree

B. Future Information (*only if different from above, and have been officially 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

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.

School Name	City, State	Dates Attended	Degree Earned

HOSPITALITY INDUSTRY WORK EXPERIENCE

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

Company Name, City, State, Telephone Number	Type of Business and Position	Date(s) Employed	Average Hours Worked per Month	Total Months Worked	Total Number of Hours*

**To calculate total hours, multiply average hours worked per month by total months worked.*

Total Hours Worked: _____

CHARACTER REFERENCES

Please identify two 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_____

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 May 20, 2024, to qualify. An <u>incomplete</u> application will not be accepted. Notification will be made to all applicants by July 31, 2024. If you have any questions, please call Tom Schuch at 505-494-5758.

Submit application to:
Hospitality Industry Education Foundation
9201 Montgomery Blvd NE Suite 602
Albuquerque, NM 87111

Hospitality Industry Education Foundation

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:

	Excellent(5)	Good(4)	Average(3)	Poor(2)	N/A(1)
Motivation	_____	_____	_____	_____	_____
Industry Interest	_____	_____	_____	_____	_____
Seriousness	_____	_____	_____	_____	_____
Work Record	_____	_____	_____	_____	_____
Balance of Activities	_____	_____	_____	_____	_____
Communication Skills	_____	_____	_____	_____	_____
Leadership	_____	_____	_____	_____	_____
Initiative	_____	_____	_____	_____	_____
Character	_____	_____	_____	_____	_____
Maturity	_____	_____	_____	_____	_____
Personality	_____	_____	_____	_____	_____
Appearance	_____	_____	_____	_____	_____

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, comments, as well as an indication of applicants potential for success 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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Leadership	_____	_____	_____	_____	_____
Initiative	_____	_____	_____	_____	_____
Character	_____	_____	_____	_____	_____
Maturity	_____	_____	_____	_____	_____
Personality	_____	_____	_____	_____	_____
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□ Yes □ No

Signature:_____Date:_____

Name (Print): _____

Address:_____

City:_____State:_____Zip:_____Phone: (____)_____

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Initiative	_____	_____	_____	_____	_____
Character	_____	_____	_____	_____	_____
Maturity	_____	_____	_____	_____	_____
Personality	_____	_____	_____	_____	_____
Appearance	_____	_____	_____	_____	_____

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□ 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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