

A Joint Program of the
Hillsborough County Hotel & Motel Association
and the

 $Florida\ Restaurant\ \&\ Lodging\ Association-Pinellas\ Chapter$

RE-APPLICATION FOR SCHOLARSHIP

Applications Accepted Until: June 15, 2012

All support documentation and official transcripts showing <u>FINAL</u> 2011/2012 Academic Year grades are due by June 30, 2012

Name:		SS#:		
Current Address:	City:	State	Zip:	
Telephone: Cell: Area Code / Number	Email Address	::		
Permanent Address:	City:	State	Zip:	
Telephone: Cell: Area Code / Number	Email Address	s:		
FINANCIAL				
Do you receive financial assistance from parents/g	uardians? If yes, pleas	e complete the follo	owing:	
Father's Name: Mother's Name:				
Address:	Address:			
City: State: Z	p: City:	Sta	te: Zip: _	
Occupation:	Occupation:			
Employer:	Employer:			
Annual Income: \$	Annual Income: \$			
Number of other dependents:	Number of other depen	dents:		
Please list number, ages & relationship of your pe	rsonal dependents:			
List source, amount & duration (recurring/one-time) of all scholarships received for the last academic year:				
Scholarship:				
Scholarship:				
List source & amount of all loans secured for curr	ent year academic related costs:			
Loan:		Amount: \$		
Loan:		Amount: \$		
List source, amount & duration (recurring/one-tim	e) of all scholarships awarded for 2012 / 2013	academic year:		
Scholarship:		Amount: \$		
Scholarship:		Amount: \$		

C.	ACADEMIC / CAREER
	Name of college or university: Anticipated graduation date:
	Official mailing address: City: State Zip:
	Name of Department Head/Counselor:
	Professional/Employment changes in the last 12 months:
D.	REFERENCES / RECOMMENDATIONS
	Please attach with contact information:
	 Two professional reference letters. One personal reference letter. Letter from a professor or a school counselor Please provide a name and number of a contact person (faculty / staff) on campus in the event you are awarded an Alliance Scholarship.
E.	STATEMENTS
	Please attach an essay (300 word maximum) that answers the following questions:
	 Why should we re-consider you for this scholarship? Has anything changed in your financial needs or career objectives? What is your current focus in this industry? How are you involved in the Hospitality / Culinary Arts Program? Where do you see yourself immediately after graduation? After 5 years? How has the TBHA Scholarship you received benefitted you?
und I fu tha my offi	nderstand that all information contained herein and any accompanying materials are accurate and complete to the best of my knowledge. It derstand that falsification or omission of information will be sufficient ground for cancellation of any award under the TBHA Scholarship Program. In the runderstand it is necessary that I make appropriate arrangements to pay necessary tuition, fees and book costs from sources other in this potential scholarship award as I understand I will not receive scholarship proceeds until the Alliance has received confirmation on educational institution's letterhead of 1) My full-time status, 2) The expiration of my academic Drop/Add period, and 3) A copy of my icial school transcript for the current semester. I also understand that it is necessary to maintain a 3.0 GPA for continued eligibility for the HA Scholarship.
	submittal of this TBHA Scholarship Re-application Form, the completed application shall serve as my acknowledgment and acceptance of the terms I conditions associated with the Tampa Bay Hospitality Alliance Scholarship Award Criteria, should my application be selected as a 2012 / 2013

В ıs 3 ai Award Winner.

Signature of Applicant

Date

Please save and email the completed application to: SWarren@hchma.com. Please Note: ALL required documents, with the exception of official transcripts, must be typed, scanned and emailed to SWarren@hchma.com. Official transcripts must be mailed to:

TAMPA BAY HOSPITALITY ALLIANCE, INC.

Post Office Box 3298 Tampa, FL 33601-3298 Attn: Stassa E. Warren

For Further Information Please Contact:

Stassa E. Warren Administrative Manager (813) 810-1641

www.extravelganza.org



SCHOLARSHIP REQUIREMENTS

TAMPA BAY HOSPITALITY ALLIANCE SCHOLARSHIP CRITERIA		
•	United States citizenship	
-	Enrollment at 2-4 year university, community college or culinary institute in a Hospitality or Culinary Arts Program	
-	Full-time status	
•	3.0 or better overall GPA (MUST be maintained)	
•	3.0 or better GPA in major (MUST be maintained)	

HIGH SCHOOL ELIGIBILITY

•	Graduating senior	
•	Acceptance to 2-4 year university, community college or culinary institute	
•	3.0 GPA and / or excellence demonstrated in specialized Hospitality / Culinary Arts Program or employment	
•	Hospitality or Culinary Arts major designation or career goal	

RESIDENCY CONSIDERATIONS

- 1. Permanent Florida resident enrolled in Florida Hospitality or Culinary Arts Program
- 2. Permanent Florida resident enrolled in out-of-state Hospitality or Culinary Arts Program
- 3. Non-Florida resident enrolled in Florida Hospitality or Culinary Arts Program

AWARD CATEGORIES

Scholarship award amounts are based upon student need, other financial support, references and application qualifications / ratings.

2-4 YEAR UNIVERSITY

- Enrolled in accredited Hospitality or Culinary Arts Program
- University Scholarship Award: \$500 to \$6,500 annually

COMMUNITY COLLEGE / TECHNICAL SCHOOL

- Enrolled in accredited Hospitality or Culinary Arts Program
- Community College / Technical School Scholarship Award: \$500 to \$2,500 annually