



WVHTA Scholarship Application (For all scholarship types)

ELIGIBILITY CRITERIA

- Be a graduating senior in a West Virginia High School.
- Have a minimum grade point average of 2.75 on a 4.0 scale.
- Have performed a minimum of 250 hours of Hospitality and Travel industry related work experience
- Have applied to a hospitality, travel, or recreation management program in a post-secondary institution, either full-time or substantial part-time, with the intent to enroll in a minimum of 2 terms.

APPLICATION REQUIREMENTS

Note: Any applications that do not meet the following criteria or are illegible will automatically be disqualified. The submission of any materials with an application other than those requested will be discarded. Examples: newspaper articles, resume, reports, etc. Please only include what has been requested and do NOT put materials into binders, slipcovers or report covers. A staple or paper clip will suffice.

- TYPED or NEATLY PRINTED application (*a word-processed document may be used in place of the application, only if presented exactly in the order of the application.* Answer every space. Mark "N/A" if it does not apply to you. A blank space will automatically be considered an incomplete application.
- Transcript from high school(s) attended (unofficial transcripts will be accepted; report cards will not).
- Proof of Hospitality and Travel-related work experience with a minimum of 250 hours verified by copies of paycheck stubs or letter(s) from employer(s) stipulating number of hours worked.
- One letter of recommendation **on letterhead** from a current/previous employer. Another letter from a teacher.
- Acceptance letter from (or copy of application to) the post-secondary institution.
Note: Before funds can be released, the Education Foundation must receive a copy of the letter of acceptance into a Hospitality and Travel post-secondary program.

JUDGES WILL SCORE THE FOLLOWING:

- Academic performance
- Industry related work experience (quantity and quality)
- Strength of letter(s) of recommendation
- Essay question (content, style, and required word count)
- Presentation of application (spelling, punctuation, neatness, etc.)

DEADLINES

Latest date to postmark application: March 31, 2009

Award recipients will be notified via U.S. mail by June 15, 2009

Please send the following materials postmarked no later than the due date to the Scholarships Program Coordinator, West Virginia Hospitality and Travel Association Educational Foundation, PO Box 3974, Charleston, WV 25339-3974.

- ✓ ***Completed Application***
- ✓ ***Transcript(s)***
- ✓ ***Essay***
- ✓ ***Proof of minimum 250 hours of Hospitality and Travel and Recreation-related work experience.***
- ✓ ***Letter of recommendation(s) on letterhead***
- ✓ ***Copy of college acceptance letter (if available) or copy of college application***

Section-1-PERSONAL INFORMATION

All scholarship correspondence will be mailed. To ensure that you receive information promptly, please provide the address and phone number where you can be contacted.

Social Security Number (must include) _____

Last Name: _____ First Name: _____ Middle Initial: _____

Permanent Address: _____

City: _____ State: _____ Zip: _____

Phone Number: (____) _____ Fax: (____) _____

E-mail Address: _____ Date of Birth: ____/____/____ Age: _____

Sex: ___Female ___Male US Citizen: ___Yes ___No If not, Permanent Resident: ___Yes ___No

You may supply the following information voluntarily. The Foundation administers an equal opportunity scholarship program.

____American Indian or Alaskan Native ____Black/African American ____White/Caucasian
____Asian American or Pacific Islander ____Hispanic ____Other _____

Section-2-SCHOOL INFORMATION

Eligible candidates must have a minimum cumulative grade point average of 2.75 on a 4.0 scale.

A. Current Information:

High School Name: _____ Phone _____

Address: _____

City: _____ State: _____ Zip Code: _____

Expected Date of High School Graduation (month/year): _____

I have applied and gained acceptance to a: ___Proprietary School ___2-year College ___4-year College

B. Future Information:

College/University Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Financial Aid Office Phone Number: (____) _____

I plan to pursue/receive a: ___Certificate ___Associate's Degree ___Bachelor's Degree

Anticipated Major: _____ Expected Date of Graduation (month/year): _____

Section-3-HOSPITALITY & TRAVEL & RECREATION WORK EXPERIENCE

Eligible candidates must have at least 250 hours of paid or voluntary industry work experience. Include ONLY Hospitality & Travel & restaurant/food service work experience, listing the most recent experience first.

Company Name, City, State	Type of Business and Position	Dates Employed	Avg. Hours Worked per Month	Total Months Worked	Total Number of Hours
Phone # ()					
Phone # ()					
Phone # ()					
Phone # ()					

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

Total Hours Worked: _____

Section-4-ESSAY QUESTION

Please type essay (word count: 250-350), double-spaced, and include with application. Scholarship judges will score your application based on your ability to express yourself articulately as a future leader in the Hospitality & Travel & Restaurant/Foodservice Industry.

**What experience most influenced your decision to pursue a Hospitality/Travel/Recreation Management career? Also discuss your goals and objectives.
(Please include this essay as an attachment)**

Section-5-Career Interests

What area of the Hospitality & Travel & Recreation Management industry do you plan to enter after graduation? (You may choose more than one option)

- | | | |
|--|--|--|
| <input type="checkbox"/> Environmental Health | <input type="checkbox"/> Hotel Management | <input type="checkbox"/> Recreation Management |
| <input type="checkbox"/> Facilities Design | <input type="checkbox"/> Resort Management | <input type="checkbox"/> Recreational Therapy |
| <input type="checkbox"/> Fine Dining restaurants | <input type="checkbox"/> Supply/Distribution | <input type="checkbox"/> Retirement Community |
| <input type="checkbox"/> Quick Service | <input type="checkbox"/> Hospital | <input type="checkbox"/> Viniculture |
| <input type="checkbox"/> Advertising & Marketing | <input type="checkbox"/> School foodservice | <input type="checkbox"/> Other _____ |

Section-6-FINANCIAL INFORMATION

Number of people in household attending college: include yourself, parents, and siblings: _____

Your expenses for One School Year

(State only amounts you are certain of or can reasonably estimate.)

- Tuition (for two terms)..... _____
School: Private In State Out of State
- Fees, books, supplies, uniforms..... _____
- Room and board _____
- Rent and utilities..... _____
- Other..... _____
- Total Expenses**..... _____

Number of terms you are planning to be enrolled before obtaining certificate or degree _____

Section-7-REQUIRED SIGNATURE

Please read prior to signing.

To the best of my knowledge, I have provided the West Virginia Hospitality & Travel Association Educational Foundation accurate information concerning all questions on this application. I agree to report to the 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 all financial assistance and recall of all awards previously made by the Foundation.

Furthermore, if I become a scholarship recipient, I will provide a photograph of myself and permit the Foundation to list my name and hometown on its Web Site and in other publicity venues as part of its campaign to recognize the industry's current and future leaders.

Signature of Applicant: _____

Date: _____

Signature of Parent or Guardian: _____

Date: _____

Scholarships

West Virginia Hospitality
& Travel Association



PO Box 3974
Charleston, WV 25339-3974
Phone: 304-342-6511
Fax: 304-345-1538
edfdn@wvhta.com
www.wvhta.com/edfoundation.cfm

General Scholarship