



## ***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 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: June 1, 2020**
- **Award recipients will be notified via U.S. mail or e-mail by July 1, 2020.**

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. If you have any questions, please contact Stella Gill at [sgill@wvhta.com](mailto:sgill@wvhta.com).

- ✓ ***Completed Application***
- ✓ ***Transcript(s)***
- ✓ ***Essay (details in Section 4 of this application)***
- ✓ ***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.

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	Ave. 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: \_\_\_\_\_

General Scholarship

# **Scholarships**

West Virginia Hospitality  
& Travel Association



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Charleston, WV 25339-3974  
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Fax: 304-345-1538  
[www.wvhta.com/edfoundation.cfm](http://www.wvhta.com/edfoundation.cfm)