2020 SCHOLARSHIP APPLICATION

FULL TIME PROGRAMS

**Please note: Incomplete applications will not be considered for scholarships.**

**REQUIREMENTS FOR APPLICATION**

* Minimum GPA of 3.0 or equivalent
* Endorsement letter from the National Hotel Association
* Three (3) letters of reference/recommendation, if possible, one of which should be from tourism industry person. If applicable, an endorsement letter from your current employer should be submitted
* Transcripts from most recent academic institution or academic course
* A recent photo of the applicant in jpeg or similar format. (*Photos may be used as part of the CHTA Education Foundation promotion and social media campaigns and so should be a positive, cheerful reflection of who you are and your hospitality aspirations*.)
* A 400-words or less statement which includes:
  + the applicant’s area of tourism and academic interest,
  + outline of financial need,
  + outline of how the scholarship will advance the applicant’s career and benefit the hospitality and tourism industry in the applicant’s country.

**APPLICATION INSTRUCTIONS:**

* All Scholarship Applications must be received **no later than April 15, 2020**
* CHTAEF is a green organization and the Scholarship Application process is paperless. Please complete the application and email it to [Foundation@CaribbeanHotelandTourism.com](mailto:Foundation@CaribbeanHotelandTourism.com).
* Incomplete applications will not be considered for scholarships.
* If you have any questions, please call 305-443-3040.
* Scholarships are awarded for Tuition Only and funds will be sent directly to the University or College directly to pay for or subsidize tuition.  No money will be sent to students.

**Please fill in all information to be eligible for a scholarship and print your name on every page**.

**Contact Information**

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  | | |
| Street |  | | |
| City |  | | |
| Country |  | | |
| Telephone |  | Mobile |  |
| Email |  | | |
| Nationality/Citizenship |  | Country of Residence |  |

**Scholarship Information**

|  |
| --- |
| Name of University or College  Location of University or College  Program Name: Provide ***complete*** degree or course name (Eg: Bachelor of Science, International Hotel Management)    ***NOTE***: applications without this complete information will be deemed incomplete and not be accepted  Are you currently Enrolled in this University or College program: Yes No  If not currently Enrolled, have you been accepted to this University or College program: Yes No  What did you or are expected to begin this program? (month & year)  What is your expected graduation date? (month & year) |

**Funding Information**

Please note that most CHTA scholarships are approximately US$5,000

1. Total annual tuition cost at college you are attending: US$ \_
2. Scholarship amount being requested from CHTA Education Foundation annually: US$
3. Are you getting any other scholarships or grants Yes No

If so, from where? How much? US$

1. Amount of self-funding expected: US$

Please list all other sources of funding to make up any differences between the tuition cost and the scholarship?

US$

US$

US$

**Education** **(Current and Past)**

**Name of Most Recent Academic Institution Attended**:

Dates Attended: From To:

Exam or Certificate Name: GPA:

*Eg: GCSE, High School Diploma, Associate’s Degree etc.*

*Please attach a copy of official transcripts****.***

Candidate Name:

**Work Experience**

*Please note Master’s Degree Candidates must show a minimum of 2-years work experience to be eligible*

|  |  |  |  |
| --- | --- | --- | --- |
| Employer |  | | |
| Job Title/Function |  | | |
| Dates (from – to) |  | Country |  |
| Supervisor |  | | |

|  |  |  |  |
| --- | --- | --- | --- |
| Employer |  | | |
| Job Title/Function |  | | |
| Dates (from – to) |  | Country |  | |
| Supervisor |  | | |

|  |  |  |  |
| --- | --- | --- | --- |
| Employer |  | | |
| Job Title/Function |  | | |
| Dates (from – to) |  | Country |  | |
| Supervisor |  | | |

**Community Involvement Professional Awards and Memberships**

Please list Please list

|  |  |
| --- | --- |
|  |  |

Candidate Name:

**Statement of Endorsement**

To be filled out by the local National Hotel Association.

**A separate letter from the National Hotel Association *may* be submitted in place of this form**.

**HOTEL ASSOCIATION ENDORSEMENT**: We support this application:

|  |  |  |  |
| --- | --- | --- | --- |
| Association’s Name |  | Date: |  |
| Executive’s Name |  | | |
| Electronic Signature |  | | |

**Applicant’s Certification Statement**

I hereby acknowledge that the information submitted herein is true, correct and complete.

I also certify that I am in need of financial assistance to continue my education and professional development and I understand that all scholarships are for payment of tuition only.

|  |  |  |  |
| --- | --- | --- | --- |
| Applicant’s Name (Print) |  | Date: |  |
| Electronic Signature |  | | |