

# 2020 SCHOLARSHIP APPLICATION Application Deadline: Wednesday, April 21, 2020

The Taste of Buffalo, Inc. in its continuing commitment to Western New York, is proud to sponsor once again, a scholarship program for college-bound students in the eight counties of Western New York who will pursue a degree in Foodservice or Hospitality industries. Up to five \$1,000.00 scholarships will be awarded and will be based on the criteria and terms described on the last page of this scholarship application.

## (PLEASE PRINT)

Name				
(Last)		(First)		(Middle)
Address				
City				
State			Zip	
Phone			Date of Birth	
E-mail Address				
Social Security	Number			
Father's Name				
Mother's Name	<u> </u>			
College/Univer	sity Planning to Attend			
Name _				
Address				
City				
State _				
Have you been	our major field of study? Te you seeking?	[ ] Yes [ ] Yes	[] No [] o	
•	chool Attending			
School _				
Address				
City		State	Zip	

BACKGROUND (Attach additional pages if necessary) What special recognition, awards or honors have you received?			
Are you currently receiving any scholarship awards? [] Yes [] No			
If yes, describe:			
Amount:			
List any extracurricular activities in which you presently participate:			
List any community activities in which you are active:			
Please describe your career goals following your graduation:			
What kinds of contributions do you think you can make to the food service or hospitality industry?			

WORK EXPERIENCE (List most recent job first)	Dates of F	
Position Held	Dates of Employment	
Company		
Address		
	Dates of Er	mployment
Position Held		
Company	_	
Address		
City/State/Zip		
Are you planning to work part time while attending school?	[] Yes	[] No
If yes, number of expected work hours per week		
Please give any additional information you feel will help the selection including financial, academic, or personal information you wish to di		ir decision,
(Attach additional page, if necessary)		
ADDITIONAL REQUIREMENTS		
<ul> <li><u>Letters of Recommendation</u>: Submit TWO (2) letters of reconsomeone who is not a relative, but who knows you and can posit and study habits, and one (1) from your School Counselor or a Temporate or Report Card: Submit your current high school transport card.</li> </ul>	ively recommend eacher	your work
I hereby certify that the information in this application is true and knowledge.	accurate to the	best of my
Date Signed		
(Applicant)		

Signature of Parent or Guardian \_\_\_\_\_

### BE SURE TO COMPLETE THE ENTIRE APPLICATION, SIGN AND DATE IT AND RETURN TO:

Cheryl Goldstone/TOB Scholarship Committee Guidance/Counseling Office Williamsville South High School 5950 Main Street Williamsville, NY 14221

#### CHECK BELOW TO BE SURE THAT YOU ENCLOSED ALL REQUIRED ELEMENTS:

[ ] Application for Scholarship (this form)
[] Two letters of recommendation (One personal; one from a High School Counselor or a Teacher)
[] Transcript from your High School and your most recent report card

Please send this application, letters of recommendation, transcript and report card as one complete package. An incomplete application package will not be considered.

#### **CRITERIA AND TERMS**

Applicants must be residents of Erie, Niagara, Orleans, Genesee, Wyoming, Chautauqua, Cattaraugus or Allegany counties in New York State and continuing their education in an accredited two or four-year school majoring in a FOOD SERVICE or HOSPITALITY curriculum. Scholarship recipients will be selected based on achievement, experience, enthusiasm, recommendations, school/community involvement, goals and overall interest.

The Scholarship Committee will choose up to five scholarship recipients. Each recipient will receive a scholarship in the amount of \$1,000.00 that may be applied to room and board, books or fees. **NOTE:** The TOB Scholarship is designated to be used for non-tuition college expenses, such as room/board, books, fees, etc. In order to receive the scholarship award, recipients will be required to provide proof of enrollment to the Scholarship Committee in the form of a tuition bill or a letter from the college of enrollment indicating that a tuition deposit has been paid.

The committee will choose alternates in the event that any of the recipients has a change in plans and does not enroll in a food service or hospitality program at an accredited two or four-year college or university. The scholarship winners will be notified by e-mail and in writing no later than May 5, 2020. Scholarship recipients will be asked to sign a Publicity Release to grant permission to print their names, college plans and possible photographs on the Taste of Buffalo website and in the Taste of Buffalo festival guide distributed at the event and on tasteofbuffalo.com. Information about the recipients will also be sent as a news release to area media.

Please contact Cheryl Goldstone at <a href="mailto:cgoldstone@williamsvillek12.org">cgoldstone@williamsvillek12.org</a> if you have any questions. Alternatively, you may contact Taste of Buffalo Event Coordinator, Connie Wendling, 249-1189

Your completed application package must be received on or before April 21, 2020.