



Les Dames d'Escoffier

INTERNATIONAL

Cleveland Chapter

Les Dames d'Escoffier Cleveland Chapter Culinary Scholarship of \$2,000

Thank you for applying for a Les Dames d'Escoffier Cleveland Chapter Scholarship. Scholarships are awarded based on academic accomplishments, career goals, culinary experience, professional and personal references and financial need.

Please note the following:

- You must be female and a permanent resident in Ohio but may reside elsewhere during school terms
- You must carry a G.P.A of at least 3.0 on a 4.0 scale, or equivalent
- You must be enrolled in a certificate or degree program in an accredited school or institution and studying a culinary field, dietetics with a culinary component, hospitality or restaurant management
- Awarded scholarship money will go directly to the school or institution in which the recipient is enrolled and must be used for tuition only. Monies will be sent to the school prior to the start of the 2019-2020 school year. Note that NO part of the scholarship monies may be applied to living expenses.
- All applications will be reviewed and measured by our standardized and weighted criteria.

Scholarship applications are accepted January 15, 2019 thru March 01, 2019. Scholarship winners will be notified by April 20, 2019.

In addition to completing the application form, applicants are required to submit three letters recommendation (one personal and two professional) and the most recent academic transcript from the current institution.

Incomplete applications will not be considered.



Les Dames d'Escoffier
 INTERNATIONAL
 Cleveland Chapter

**Les Dames d'Escoffier International
 Cleveland Chapter**

**Academic Scholarship Application
 2019/2020 Submission deadline March 01, 2019**

Last Name	First Name	Middle Name
-----------	------------	-------------

Last 4 Digiits of Social Security Number

Current Address	City	State	Zip Code
-----------------	------	-------	----------

Email Address	Phone Number	Alternate Phone Number
---------------	--------------	------------------------

Permanent Address	City	State	Zip Code
-------------------	------	-------	----------

I AM A PERMENENT RESIDENT OF OHIO _____(Please initial)

Are you a full time culinary arts student currently enrolled in an accredited Educational Institution or Program in a Culinary Field, Dietetics with a Culinary Component, Hospitality or Restaurant Management?

_____ YES _____ PART TIME Expected Graduation date _____

Program enrolled in _____



Les Dames d'Escoffier

INTERNATIONAL

Cleveland Chapter

School you currently attend:

Institution Name

Address

City

State

Zip Code

Phone Number

Financial advisor to whom the scholarship check will be sent

Name of current instructor(s) _____ Phone Number(s): _____

Course(s) _____

Describe your personal financial resources, including anticipated tuition, fees, other expenses and your ability to work; including any special circumstances.

List all Scholarships and/or Grants you have already received and the amount awarded for the 2019/2020 school year.



Les Dames d'Escoffier

INTERNATIONAL

Cleveland Chapter

Work Experience and Apprentice or Training Programs: List appropriate work experience, including dates worked and any training or apprentice programs, including description of program, start and completion dates and number of credit hours received, if any.

Community Service: List what you consider significant Volunteer or Extracurricular activities you have engaged in. Describe your responsibilities, and include dates and number of hours worked.

How do you see yourself giving back to the community thru food?



Les Dames d'Escoffier

INTERNATIONAL

Cleveland Chapter

Please tell us about a memorable culinary experience.

Please write, in 300 words or less, why you have chosen a career in the culinary field and your short and long term goals.



Les Dames d'Escoffier

INTERNATIONAL

Cleveland Chapter

APPLICANTS STATEMENT OF VERIFICATION

I, the undersigned applicant, pledge that the information submitted in this application is true and correct to the best of my knowledge. I grant permission to contact my reference instructor(s) at my school for information about my work performance and potential.

In addition, I understand that should I receive a scholarship, I will provide a photo as requested for use in press releases and other public relations that relate to the school I attend and Les Dames d'Escoffier Cleveland Chapter.

SIGNATURE OF APPLICANT:

DATE: ____/____/____

Please place your name and school name on all attached paperwork.

Return the completed application to your school advisor, to be approved and submitted to Les Dames d'Escoffier Cleveland before March 01, 2019.

To email application and associated paperwork:

ldcleveland@gmail.com Please put **Scholarship Application** in the subject line

Our Mission

Les Dames d'Escoffier Cleveland is the Cleveland chapter of Les Dames d'Escoffier International. Our members are professional women in the food, beverage, and related industries. All are women of achievement, leaders in their fields as well as their communities, all with a minimum of five years' experience. The goal of our chapter is to carry out the mission of our parent organization: to educate, advocate and donate; to assist and promote women in the professions of food, wine and hospitality; and to participate in Green Tables, LDEI's Civic Agriculture and Garden Initiative, aimed at helping consumers of all ages better understand the link between farming and eating. In addition we provide opportunities for our members and their guests to socialize, network, and learn.

THANK YOU FOR APPLYING AND GOOD LUCK!