

**EDUCATIONAL FOUNDATION –
SCHOLARSHIP APPLICATION**



**Use this form if you are:
ENROLLED IN OR ACCEPTED TO AN ACCREDITED
COLLEGE OR UNIVERSITY HOSPITALITY
EDUCATION RELATED PROGRAM**

(Please type or print clearly)

STUDENT INFORMATION

Name _____ Male _____ Female _____

Home Address _____ City, State, Zip _____

Phone Number (Home) _____ (Work) _____ (Cell) _____

email Address _____

PROGRAM WHERE SCHOLARSHIP DOLLARS WILL BE APPLIED

Name of College or Educational Institution _____

Address _____ City, State, Zip _____

Program of Study/Course _____

Working toward what degree? _____

When will you complete this program? _____

A letter of recommendation must accompany this application. The letter may be from either 1) a faculty member at the school where the applicant is currently enrolled; or 2) a faculty member at the program where the scholarship dollars will be applied.

STATEMENT OF ACTIVITIES, EXPERIENCES AND ASPIRATIONS

Applicants must submit a typed statement outlining extracurricular activities, work experiences, academic honors and career aspirations in the hospitality industry. Statement should not exceed two double-spaced pages.

The information contained in this application is accurate to the best of my knowledge.

Signature of Applicant _____ Date _____

RETURN TO: CRVA Educational Foundation, 500 S. College St., Suite 300, Charlotte, NC 28202-1873
704.339.6123 / FAX 704.831.2640