

Caribbean Hotel & Tourism Association EDUCATION FOUNDATION ACADEMIC – PROFESSIONAL DEVELOPMENT – TEACHER Scholarship Application

Please use this as a checklist and include it with your application:

	Application submitted electronically BEFORE March 12, 2010.
	Photo submitted electronically – clearly saved as your name & country.
	Type of scholarship and type of course indicated.
	Institution selected is listed by CHTAEF.
	Course is hospitality / tourism specific.
	Course has been researched and details included in application – including tuition fees note or schedule. <i>Please note we do not fund travel, accommodation, equipment or book costs.</i>
	Copy of offer / acceptance letter from institution.
	Three (3) references / recommendations submitted.
	Biography statement relative to financial need submitted.
	A written 300-word essay on the benefits of the scholarship to you, your nation and the region.
	Answered and submitted all segments of application forms.
	Signed the application.
	Endorsed by the National Hotel Association.
	Endorsed by the Executive of the Hospitality College/University.
	Confirmation of employment from Hospitality College/University (for teachers).
	Your name on each sheet in the space provided.
	If Professional Development application, electronic copy of your establishments CHTA Membership Certificate.

Submission Information:

CHTAEF is paperless from 2010. Applications must be received no later than March 12 2010.

Email to janet.foundation@caribbeanhotelandtourism.com

You may send your application to us by using the checklist above and submitting application form and attachments – each attachment must be saved with your name & what it is – alternatively you may scan your completed application form with attachments in the order shown on the checklist above and email as one document saved as your name & type of application. **IMPORTANT: email subject line to read Type of Application & Your Name.**

You may also FAX your application to us as +1 305-716 9138

For further information you may contact us by email as shown above or Monday to Friday, 9am-noon Eastern Caribbean Time on +1 305 767 4211 or Skype caribbeaneducationfoundation

Name of applicant _____ *complete on each page.*



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MISSION STATEMENT

“To foster a world-class force of Caribbean professionals in hospitality & tourism by providing development opportunities through scholarships, grants, and career awareness.”

Guidelines:

Please type or print clearly.

- Make sure you complete this application fully, with all the information requested.
- Include a current photo of yourself.
- Submit references / recommendations.
- Make sure you give full current contact details including an email address.
- Incomplete application forms without proper and full contact details will be disqualified.



2010

Please indicate with a tick (✓) in the box below, which type of scholarship you wish to apply for (select only one).

Academic Scholarship - In tourism, hotel and/or restaurant management / culinary arts/ sustainable tourism / event management.

Please tick the appropriate box for full or part time study.

- Full time study
- Part-time study

Scholarship for Professional Development - For industry employees.

Available only to employees of CHTA member hotels with a minimum of 2 years' working experience. Programs/courses must be hotel/ tourism related.

- (a) Industry employee
- (b) Co-funded scholarships for Hospitality Management

Grants to Teachers - For teachers in hotel / hospitality Industry.

Available only to employees of hospitality schools with a minimum of 2 years' full time teacher experience. Confirmation of employment must be included with this application.

- Further education grants
- Industry work experience

Name of applicant _____ complete on each page.



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APPLICANT INFORMATION:

Name: _____

Mailing Address: _____

Tel: _____ Mobile: _____

Email: _____ Fax: _____

Where were you born? _____

What is your nationality? _____

School (If applicable):

Name: _____

Address: _____

Tel: _____ Fax: _____

Student Advisor: _____ Email: _____

Education / Studies - From secondary education onward, begin with most recent

Name of school	Dates (from - to)	Courses taken	Level of achievement

Name of applicant _____ *complete on each page.*



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Work Experience - Begin with most recent

Name of employer and country	Dates (from – to)	Job title

Professional and / or relevant memberships / awards or accomplishments –

Begin with most recent

Name of applicant _____ *complete on each page.*



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SCHOLARSHIP INFORMATION

Program / Course / Degree you wish to Pursue (must be hospitality/ tourism related).

Name of the Institution you wish to attend (Preference will be given to affiliated institutions listed on the information sheet).

Have you researched the following? Please attach supporting documentation (tuition cost letter / schedule from your selection institution, etc.) Preference will be given to applicants who have been offered a place at the institution of their choice.

- Cost / co-funding / student loans etc.
- Dates / availability
- Agreement from employer to grant leave of absence (if applicable).

Estimated TUITION cost for one year of the program or duration of short courses:
Please do NOT include any other expenses just Tuition for 1 year or less: US\$

Amount of sponsorship requested for one year only or short course: **US\$**

Dates of course(s) (MM/YY): _____

Duration of course(s): _____

Please tell us if you have applied to other funding/scholarships somewhere and who?

Are you currently enrolled: No Yes Year: _____

If no, have you been **accepted** on the course of your choice? Yes No

Name of applicant _____ complete on each page.



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Specific course description, degree or diploma awarded on completion of course and other relevant information:

Scholarship Application

Please complete the section related to the scholarship you are applying for:

Academic Scholarship (If applicable):

Name of employer: _____

Address: _____

Tel: _____ Fax: _____

Immediate supervisor: _____ Email: _____

Scholarship for Professional Development - Employed by:

Name of CHTA hotel or business: _____

Address: _____

Tel: _____ Fax: _____

Immediate supervisor: _____ Email: _____

Grants to Teachers

Name of hospitality school (employed by): _____

What is your present job position? _____

Address: _____

Tel: _____ Fax: _____

Immediate supervisor: _____ Email: _____

Is the course specific to your present job? Yes No

DOCUMENTATION

Name of applicant _____ complete on each page.



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Financial need

Provide us with a **brief explanation of your past, present, and future financial circumstances**, with special reference to the benefits of a scholarship.

Scholarship request essay

Submit a minimum **300-word essay** explaining how the granting of this scholarship will enrich your work experience, enhance your career opportunities and benefit your country / the region.

References

Supply with this form **THREE references to support your application**. It is desirable to have:

- One reference from your current employer or supervisor or principal or student advisor
- One should be from a hotel guest, which could be in the form of a “thank you” letter or community outreach program
- One from one of your peers

CERTIFICATION

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 professional development. I hereby state that the proceeds of any scholarship received will be used for payment of tuition fees unless otherwise agreed upon. **I have personally completed this application form:**

Applicant's name (print): _____

Signature: _____ Date: _____

Statement of Endorsement

I, the undersigned, completely support and endorse this applicant.

Employer's name: _____

Signed: _____ Date: _____

Owner / General Manager Other: _____

National Hotel Association: (see listing on the information sheet)

We support this application and, if for professional development scholarship, confirm their establishment is a CHTA member.

Association's name: _____

Executive's name: _____

Signed: _____ Date: _____

For Hospitality Teachers Grants only

Hospitality School Executive: _____

Position: _____

Signed: _____ Date: _____

Name of applicant _____ complete on each page.

