

Scholarship Application



About Us

The Epicurean Charitable Foundation Las Vegas (ECF) is a nonprofit organization dedicated to the enrichment, involvement and education of those individuals committed to pursuing a career in the hospitality industry.

Eligibility

All high school seniors in Clark County who plan to attend an accredited post-secondary institution as a full-time student during the academic year following their graduation may apply for this scholarship. Applicants must plan to obtain a bachelor's degree and major in Hotel Management, Food & Beverage, Culinary, or related programs. Other qualifications include demonstration of financial need (combined family income must not exceed \$70,000 annually) and a 3.0 cumulative GPA.

Award

Multiple scholarships will be awarded. Scholarships are awarded in amounts **up to** a maximum of \$33,000 for students attending University of Nevada, Las Vegas, and **up to** \$48,000 for those choosing to attend another institute of higher learning, after taking into consideration all government financial aid for which recipient is eligible and any scholarships awarded to recipient on ECF's behalf. ECF is a proud partner with UNLV and gives preference to applicants attending the university.

The Epicurean Charitable Foundation reserves the right to terminate scholarships at any time for any reason. Each student is required to apply for FAFSA, as it is taken into consideration of what ECF will pay towards tuition.

Students must plan to obtain a bachelor's degree and be enrolled on a full-time basis.

The awards may be renewable for up to three years providing that the recipient: maintains a 3.0 cumulative GPA, is enrolled full-time, is enrolled in Hospitality Management, Food & Beverage, Culinary, or related program, adheres to scholarship agreement requirements, and has not been suspended from the Foundation for any reason. The monies are applicable to costs of tuition, books and fees. Room and board is not covered by the ECF scholarship.

Deadline

Applications must be received in the ECF office or postmarked by **March 13, 2017**.

Application Submission



Epicurean Charitable
Foundation

L A S V E G A S

Required Documents

Please submit the completed application, including the following documents in this order:

- Applicant's General Information form
- Financial Statement (Note: Combined family income must be less than \$70,000 - gross income)
- Your career goal statement describing the following:
 1. Career objectives
 2. Interests in hotel/hospitality, food & beverage, and/or culinary industry
 3. Why you should be an Epicurean Charitable Foundation Las Vegas scholarship recipient
- Transcript (including 7th semester grades)/Test Scores
- Résumé of awards, activities, employment (including average hours worked per week) and community service. Please include the name and phone number of your employer if you are employed
- Two letters of recommendation - one from school personnel (teacher, school counselor or school administrator) and one from an employer or community service organization
- Three personal references with their contact information

Applying

You may apply by:

1. Emailing completed application and all required documents to info@ecflv.org
 - a. In the subject box of the message please type: Your name and Scholarship Application
 - b. Please name your file: last name_first name_scholarship
2. Mailing and/or dropping-off completed application and all required documents to:

Epicurean Charitable Foundation
Attn: Scholarship
6765 S. Eastern Avenue, Suite 1
Las Vegas, NV 89119

* All folders, report covers, etc. will be discarded so please do not include.

Process

Applicants will be notified within 2 weeks in writing following the deadline whether or not he/she has advanced to the first round of interviews. Those advancing in the process can expect to be interviewed up to four times on separate dates by various panels of board members and staff. Finalists will be required to provide a copy of their FAFSA (Free Application for Federal Student Aid), and parent's/guardian's tax return (1040).



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APPLICANT'S GENERAL INFORMATION (FILL IN COMPLETELY)

Student # _____ High School _____
 Class rank: _____ out of _____ Weighted GPA: _____ Unweighted GPA: _____

Name of applicant:

_____ Last _____ First _____ M.I. _____

Date of birth: _____ Place of birth: _____

How did you hear about ECF: _____

Applicant's address: _____

City: _____ State: _____ Zip code: _____

Home phone: _____ Cell phone: _____

Email address: _____

Social media username(s): Facebook: _____ Instagram: _____

Snapchat: _____

Are you employed: _____ Where: _____ Do you intend to work while attending college? _____

What family responsibilities do you have? _____

What is your career objective? _____

SAT Composite: _____ I have not taken the SAT because: _____

SAT Writing: _____ I am taking it at a later date: _____

ACT Composite: _____

Please list the colleges/universities to which you have applied in preference order:

Name of School	Major	Minor	Accepted



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FINANCIAL STATEMENT (FILL IN COMPLETELY)

** Combined family income must be less than \$70,000 annually (gross income)**

Applicant: _____

Name of parent(s) or guardian(s): _____

Occupation of parent(s) or guardian(s): _____

Employer: _____ Annual salary \$ _____

Employer: _____ Annual salary \$ _____

Other income sources (include additional scholarships/grants awarded)

Source: _____ Amounts \$ _____

Source: _____ Amounts \$ _____

Total income (Box 22 on 1040 Form) as reported on parent's federal income tax return: \$ _____

Total number of exemptions claimed on tax return: _____

Number of adults in the family: _____

Number of dependent children in the family: _____

If both parents reside at the same address, do they both work? Yes No

Estimated annual college costs (tuition, room and board, etc.) \$ _____

ECF does not cover room and board. Do you plan on living on campus? _____

Are there any additional household or financial circumstances that may pertain to this application?

(An additional page may be added if necessary)

I agree that all information on this form is current, accurate and truthful.

Applicant Name

Date

Parent/Guardian Signature

Date



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CERTIFICATIONS AND AUTHORIZATIONS

All of the information provided on this form is true and complete to the best of my knowledge. I certify that I am attending or plan to enroll in an accredited and approved post-secondary institution for the 2016-2017 academic years. I hereby authorize the Epicurean Charitable Foundation of Las Vegas to utilize information about my application and my likeness for publicity and public relations purposes.

Applicant Name

Date

Applicant or Parent/Guardian Signature (If applicant is under 18 years of age)

Date

I understand that if I do not graduate from high school by meeting all standards set forth by the Department of Education of the State of Nevada, I will forfeit this scholarship should it be awarded to me. I agree to abide by all of the terms of the scholarship award or forfeit the award should it be awarded to me. I also agree that all parts of the application are retained as property of the Epicurean Charitable Foundation Las Vegas. I understand that the Epicurean Charitable Foundation reserves the right to terminate my scholarship for any reason, without notice, should I be selected as a scholarship recipient.

Applicant Name

Date

Applicant or Parent/Guardian Signature (If applicant is under 18 years of age)

Date

AUTHORIZATION FOR RELEASE OF RECORDS

To comply with the provisions of the Family Educational Rights and Privacy Act of 1974, permission is hereby given to school officials to release the school records and other requested information for consideration in the Epicurean Charitable Foundation Las Vegas Scholarship.

Applicant Name

Date

Applicant or Parent/Guardian Signature (If applicant is under 18 years of age)

Date

Your application will not be reviewed without this document.

**Thank you for your interest in the Epicurean Charitable Foundation's scholarship.
We wish you the best in your future endeavors.**