

EDUCATION FOUNDATION

Ohio ProStart Scholarship Program APPLICATION

APPLICATION FOR SCHOLARSHIP - DEADLINE February 28, 2023

The Ohio Restaurant Association Education Foundation is pleased to present the 2023 Ohio ProStart Scholarship program to you. Scholarships range from \$1000 to \$2500 and multiple can be awarded per student.

Scholarship funds not used by December 31, 2023 will be forfeited.

Eligibility Criteria:

- Applicant is a graduating senior ProStart student.
- Applied for and will earn a Certificate of Achievement (COA).
- Be enrolled or accepted as a full-time or substantial part-time student at an accredited post-secondary institution, college or university for the 2023-2024 school year.
- Plan to major in a restaurant, hospitality or foodservice related program.
- Recipients cannot be employees or family members of the National Restaurant Association, NRAEF, or a state restaurant association or foundation (e.g., ORAEF).
- If awarded scholarship, must attend Celebration of the Stars Award luncheon in April 2023

For your application to be reviewed by the scholarship committee, the following items are required by February 28, 2023:

- 1. Completed application form.
- 2. Transcript from primary high school.
- Proof of acceptance to an accredited post-secondary culinary arts, foodservice, hospitality or restaurant management program. Note: If application for admission has been filed, but is pending when this scholarship application is submitted, scholarship will be awarded contingent upon acceptance to a qualified culinary arts, hospitality or food management program.
- 4. **TWO** letters of recommendation on School or Company letterhead from current or previous teachers, mentors and/or employers.
- 5. **TYPED** completed essay.
- 6. Digital yearbook photo, senior picture or professional headshot. No selfies, please.

Section I Personal Information of Applicant

First Name:	Last Nar	ne:	Middle Initial:
Street Address:			
City:	State:	Zip C	code:
Cell Phone Nun	nber (include area code):		
Personal E-mail	I address (other than school e-mail):		
Age:	Date of Birth:	US Citizen: Yo	es No
Preferred Prono	ouns:		
Parent(s) or	Guardian(s) Information		
Parent(s) or Gua	ardian(s) Full Name(s):		
Parent(s) or Gua	ardian(s) E-Mail Address(es):		
Parent(s) or Gua	ardian(s) Primary Phone Number(s):		

Parent or Guardian information will be kept confidential and will only be used for updates and important information regarding the Ohio ProStart scholarship.

Section II School Information

High School or Career (Center attended for Ohio ProStart	Program:	
Address of School:			
City:	State:	Zip Code:	
Ohio ProStart Instructor	r's Name:		
Expected Graduation D	Date:		
NOTE: Applica	ant must provide copy of curren	t high school transcript with application.	
I have applied to	to AND gained acceptance to:		
School Name:			
Anticipated Course of S	Study:		
Please share your need response in the space How would you need Are you pay Are you taking	d for this scholarship and why you provided below. Consider the followyou finance your college education to work while attending college? Ving your own way for college? Ing out student loans? Trst-generation college student?	should be selected. Please <u>TYPE</u> your wing:	

Section IV Restaurant, Culinary Arts and Hospitality Related Courses

Please list all	restaurant, culinary arts a	nd hospitality relate	d courses you have s	uccessfully completed.
Courses				Completion Date
Section V	Honors, Awards a	nd Achieveme	<u>nts</u>	
Please list all	honors, awards and achie	evements you have	earned	
Offices or I	Leadership Position	s Held (organiz	zation, position)	
Are you a Pro	Start Leader? Yes	No	School year(s)

Volunteer Service / Co	mmunity Involvement:	
Extracurricular Activiti	<u>es:</u>	
Section VI Restauran	t and Hospitality Work Exp	perience (paid or unpaid)
Please list all work experienc	e you have had in the restaurant, f	oodservice and hospitality field.
Name of Employer	Position Held	Dates Employed

Section VII Essay Question #2 - Word Count 500-750

On a separate sheet of paper identified with the name of the applicant, please **TYPE** (double space) your response to the following questions and attach your response to the application:

- Why should the scholarship selection committee select you?
- How do you exemplify ProStart Core Values listed below?
 - Leadership: Responsible and ethical decision-makers who embody positivity and motivate change.
 - o **Community**: Putting forth our best effort socially, civically and professionally.
 - o **Passion**: Creativity, vision and enthusiasm that drive us beyond the extraordinary.
- Please include any other information that would help you be selected for a ProStart scholarship.

VERIFICATION

I hereby certify to the ORAEF Scholarship Awards Committee of the Ohio ProStart Scholarship Program
that the information contained in this application (including accompanying transcript, letters of
recommendation and proof of acceptance) is complete and accurate and that the responses to the essay
questions are the applicant's own work product.

Date	Signature of Applicant

Applications with all required attachments must be emailed <u>or</u> postmarked on or before

February 28, 2023

EMAIL: info@oraef.org

MAIL: ORAEF - Ohio ProStart Scholarship 100 E. Campus View Blvd., #150 Columbus, OH 43235