



2021 SCHOLARSHIP APPLICATION

Please note: Incomplete applications will not be considered for scholarships.

REQUIREMENTS FOR APPLICATION

- Minimum GPA of 3.0 or equivalent _____
- Endorsement letter from the National Hotel Association _____
- Three (3) letters of reference/recommendation, if possible, one of which should be from tourism industry person. If applicable, an endorsement letter from your current employer should be submitted _____
- Transcripts from most recent academic institution or academic course _____
- A recent photo of the applicant in jpeg or similar format. (Photos may be used as part of the CHTA Education Foundation promotion and social media campaigns and so should be a positive, cheerful reflection of who you are and your hospitality aspirations.) _____
- A 400-words or less statement which includes: _____
 - the applicant's area of tourism and academic interest,
 - outline of financial need,
 - outline of how the scholarship will advance the applicant's career and benefit the hospitality and tourism industry in the applicant's country. _____

APPLICATION INSTRUCTIONS:

- All Scholarship Applications must be received **no later than April 15, 2021**
- CHTAEF is a green organization and the Scholarship Application process is paperless. Please complete the application and email to Foundation@CaribbeanHotelandTourism.com.
- Incomplete applications will not be considered for scholarships.
- If you have any questions, please call 305-443-3040.
- Scholarships are awarded for Tuition Only and funds will be sent directly to the University or College directly to pay for or subsidize tuition. No money will be sent to students.

Please fill in all information to be eligible for a scholarship and print your name on every page.

Candidate Name: _____

Contact Information



Name _____
Street _____
City _____
Country _____
Telephone _____ Mobile _____
Email _____
Nationality/Citizenship _____ Country of Residence _____

Education (Current and Past)

Name of Most Recent Academic Institution _____ *If currently enrolled, please list here, otherwise please list last academic institution*
Dates Attended (from) _____ (to) _____
Area of Study/Degree _____ GPA _____
*A copy of official transcripts is **required** to verify grades.*

Work Experience

Employer _____
Job Title/Function _____
Dates (from – to) _____ Country _____
Supervisor _____

Employer _____
Job Title/Function _____
Dates (from – to) _____ Country _____
Supervisor _____

Employer _____
Job Title/Function _____
Dates (from – to) _____ Country _____
Supervisor _____

Candidate Name: _____



Community Involvement

Professional Awards and Memberships

Please list

Please list

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Scholarship Information

What is Your Area of Interest? Please select ONE

Hotel Management

Culinary Arts

Tourism Management

Event Management

Other (please specify) _____

Terms: Please select ONE

Full time study

Part time study

Online or Open University

Degree Type: Please select ONE

Associate Degree

Bachelor's Degree

Master's Degree

Currently Enrolled/Accepted by the University or College:

Yes

No

Name of University or College _____

Location of University or College _____

Start Date _____

Graduation Date _____

Program Description: Provide degree or course name (Example: Bachelor of Science, International Hotel Management)

Candidate Name: _____



Funding Information

Please note that most CHTA scholarships are approximately US\$5,000

- A. Total annual tuition cost at college you are attending: US\$ _____
- B. Scholarship amount being requested from CHTA Education Foundation annually: US\$ _____
- C. Are you getting any other scholarships or grants [] Yes [] No
- D. Amount of self-funding expected: US\$ _____

If so, from where? _____ How much? US\$ _____

Please list all other sources of funding to make up any differences between the tuition cost and the scholarship?

_____ US\$ _____

_____ US\$ _____

_____ US\$ _____

Statement of Endorsement

To be filled out by the local National Hotel Association.

A separate letter from the National Hotel Association may be submitted in place of this form.

HOTEL ASSOCIATION ENDORSEMENT: We support this application:

Association's Name _____ Date: _____

Executive's Name _____

Electronic Signature _____

Applicant's Certification Statement

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 education and professional development and I understand that all scholarships are for payment of tuition only.

Applicant's Name (Print) _____ Date: _____

Electronic Signature _____