

CULINARY ARTS & HOSPITALITY SCHOLARSHIP APPLICATION

Divine Catering & Events takes pride in equipping the next generation of students pursuing a Culinary Arts/Hospitality career; with what they need to succeed. We are offering two \$500 scholarships to qualified students in the culinary and hospitality program at Sinclair Community College to help pay for the cost of education.

Who can apply?

Current or future culinary arts and hospitality students are encouraged to apply for the Divine Catering & Events' Culinary Arts and Hospitality Scholarship. These students include:

- · Freshmen and returning students
- High school seniors planning to pursue a degree in the culinary arts or hospitality field
- · Exemplary students with GPA of 2.75 or higher

The Essay:

How will you make a difference?

Submit a 500-word essay that tells us why you are passionate about pursuing a career in the culinary arts or hospitality field and what your plans are upon successful completion of the program. Do not put too much pressure on yourself; we just want to know about your goals and dreams.

The Application:

The Divine Catering & Events Culinary Arts and Hospitality Scholarship grants \$500 to three students. *Students can begin submitting applications on July 15, 2022.* All applications are due by August 1, 2022. The winners of the scholarship will be notified by August 15, 2022. The one-time scholarship aware will be paid directly to Sinclair Community College for use to cover expenses for the 2022-2023 academic year. To be considered, please complete the form below, including the submission of your essay in a PDF or Word document.

DIVIN Catering and Events

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You must print all your answers neatly in blue or black ink. Application response may be sent via email to dce@divinecateringevents.com. Scholarship application, transcripts and two letters of recommendation along with the 500-word essay must be postmarked by 8/1/2022 to the above address.

1. Name	,	, <u> </u>			
Permanent mailing add	ress	Tilst			111.1.
S	Number and street				
	Number and street				
City	State	Zip Code	E-mail	Address	
Phone		Birth o	date	,	
			Month	Day Year	
2. Anticipated Graduatio	n Date:				
High School Name or GED Coo	unty	City			State
	~High school stud	dents or Returnii	ng Students	Onlv~	
	o .		0	•	
3. High School GPA:	College G	PA:			
	~Applicant must be reg	ristered at Sincla	ir Commun	itv College~	
4. Have you received an ac	sceptance letter from Sil	nciair Communit	y College? _		
Major Field of Study					
Anticipated graduation	date from Sinclair Com	nmunity College			
	date from Sinclair Com		Year	Month	
5. Letters of Recommenda members)	tion: Please provide tw	o letters of recor	nmendation	along with this app	lication. (no family
CERTIFICATION. ALL complete to the best of my permission to scholarship supporting documentation s	knowledge. I agree to gelection committees to	give proof of the review informati	information on on this fo	on this application orm, my transcripts,	if requested. I give
Signature			Date	e	