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**Scholarship Application Form**

**Scholarships** are funding for educational purposes: school tuition, culinary tours, and scholastic events. Each chapter member, in good standing with the ACF and the ACF Central Florida Chapter, Inc, may apply for a scholarship not to exceed $2500 per calendar year, providing the criteria is met and approved by the chapter's Scholarship Committee and Board of Directors. This assistance is based upon available funds allocated by the ACF/CFC Board of Directors on a yearly basis: January 1st thru December 31st.

**Scholarship Criteria**

1. Applicant must complete our chapter's Scholarship Application Form.
2. Applicant must be in good standing with the ACF and with the ACF Central Florida Chapter.
3. Applicant must provide documentation that he or she has participated in at least three chapter meetings, events or fundraisers within one year prior to the date of application.
4. Applicant must provide a current resume.
5. Applicant must provide a "Letter of Intent" stating their desire to continue working within the chapter and how their education will benefit the chapter.
6. Applicant must provide a breakdown of expenses related to the chapter funding requested.
7. Applicant must agree to furnish a report/recap of what was learned and what was found to be beneficial from the attended event. The Board of Directors may ask applicant to present their report in a general meeting or for publication in the newsletter or website.

The Scholarship Application Form is provided in a Word Document. Please fill it out in Microsoft Word or provide the required information in a typed document to use as a cover page. Provide all letters and supporting documents in the order requested.

All requested information must be provided to the ACF Central Florida Chapter's Scholarship Committee at least 30 days prior to event - 60 days is optimal - to allow time for the committee and the chapter Board of Directors to consider the request.

All approved scholarship funds will be dispersed at completion of the educational event with "proof of completion". No checks will be issued prior to the educational event. No check will be issued to an individual, unless approved by the Board of Directors. All checks will be made out to an approved school or educational event site. All moneys are to be spent on approved educational expenses i.e. tuition and textbooks. Travel, lodging and food are not approved items for scholarship money.

**1)** Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ACF number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State \_\_\_\_\_\_\_\_\_\_ Zip \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employer or School Attending \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Amount of Scholarship requested $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please briefly state the reason for your request: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**2)** ☐ I am an ACF member in good standing.

**3)** ☐ I am an active chapter member. *(Please list 3 or more chapter events, meetings, and fundraisers that you have participated in within the past year. Documentation requested.)*

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**4)** ☐ I have attached/included a copy of my current resume.

**5)** ☐ I have attached/included a letter from my employer or sponsor.

**6)** ☐ I have attached/included a personal "Letter of Intent".

**7)** ☐ I have attached/included a breakdown of expenses involved with attending this event.

**8)** ☐ Yes, I agree to provide the ACF Central Florida Chapter's Board of Directors with a brief report/recap of my experience at the event I received a Scholarship for. I also understand that I may be asked to present this report in front of the membership or for inclusion in the website or newsletter.

Please provide all letters and supporting documentation in the order requested.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant Signature Date

***Please mail completed application to:***

ACF Central Florida Chapter

Attn: Scholarship Committee

207 Indiana Avenue, St. Cloud, FL 34769

***Or email form and documentation to:***

marketingchefs@acfcfc.com

Please put "Attn Scholarship Committee" in the subject line.