ILLINOIS
HOTEL & LODGING ASSOCIATION
Educational Foundation

2012 SCHOLARSHIP RENEWAL APPLICATION

The hospitality industry needs future leaders.

The purpose of our scholarship is to financially assist Illinois residents who have demonstrated a desire to make the hotel and hospitality industry a career. Scholarships may be available in amounts ranging from $1,000 up to $5,000 per academic year. This application will be considered for the 2012-2013 academic year. You must comply with the eligibility and selection criteria and requirements of the IHLA Educational Foundation Scholarship Program to be considered for a renewal scholarship. As determined by the Scholarship Selection Committee, renewals may or may not be awarded the same amount as previous year(s) or may be rejected. Winners of named awards will not be eligible for the same the following year.

We wish you the greatest success in achieving your academic and career goals. And now, we invite you to reapply.

YOU ARE ELIGIBLE IF:

- You are a student enrolled full-time (12 credit hours) in an accredited college or university hotel and/or hospitality management degree granting program anywhere in the U.S. Or,
- You are a student enrolled in at least six credits per semester in an accredited college or university hotel and/or hospitality management degree granting program and are also employed a minimum of 20 hours per week in the hospitality industry. **AND,**
- You are a previous scholarship recipient. However, scholarship awards are for one year only. You must reapply on an annual basis and include one (1) letter of recommendation.

AND

- You are a permanent resident of Illinois and a U.S. citizen or permanent U.S. resident for at least twelve (12) months at the time of application.

THE SELECTION CRITERIA REQUIRES:

- A maintained Grade Point Average (GPA) of at least 2.5/4.0 or 3.5/5.0 (C+).
- A typed essay detailing how the IHLAEF scholarship you received last year helped reach your goals in the hotel and/or hospitality industry and what you are doing to advance your future in the industry.
- Your extracurricular activities and accomplishments within the past year. This should include, but not be limited to, school, community and charitable activities.
- One letter of recommendation from an education professional, a current or former employer or industry professional.

Please note:

- Your ACT/SAT scores may be requested at any time throughout the selection process.
- If selected, you may or may not be asked to attend a personal interview with the Scholarship Selection Committee. Interviews may be conducted in person or via phone in June at the IHLA Educational Foundation office, 27 East Monroe, Suite 1200, Chicago.
- Your completed application, together with all required enclosures must be submitted to the IHLA Educational Foundation and postmarked no later than **May 2, 2012.**

APPLICATION DEADLINE: MAY 2, 2011

YOUR INFORMATION

NAME:_____
Last **First** **Middle**

(SOCIAL SECURITY # will be required at the time of award processing if selected.)

PERMANENT ADDRESS:_____

CITY:_____ **STATE:**_____ **ZIP:**_____

PHONE #: (___)_____ **CELL #: (___)**_____

E-mail:_____

ADDRESS AT SCHOOL:_____

CITY:_____ **STATE:**_____ **ZIP:**_____

PHONE #:(___) _____ **CELL #: (___)**_____

E-mail:_____

PARENT OR GUARDIAN'S FULL NAME: _____

ADDRESS:_____

PHONE #:(___)_____ **E-mail:**_____

ACADEMIC INFORMATION

Name of College or University:_____ **[ ] Accepted [ ] Enrolled**

Current College Grade Level: [ ] Freshman [ ] Sophomore [ ] Junior [ ] Senior

Major/Program :_____ **[ ] Accepted [ ] Enrolled**

Will you be enrolled in school full time? [ ] Yes [ ] No (*A minimum of 12 credit hours is considered full time*)

If No, number of hours working per week:_____ **Number of Credits:** _____

Current College Grade Point Average: _____ **Anticipated Graduation Date:**_____

FINANCIAL NEED

Failure to provide all the information requested in this section may result in disqualification of your application.

Please state the amounts for your anticipated school year:

ESTIMATED COSTS PER YEAR:

Cost of Tuition: $_____

Books: $_____

Fees: $_____

Room & Board $_____
(if living at school)

Estimated Miscellaneous Costs: $_____

TOTAL: $_____

SUPPORT FROM OTHER SOURCES:

Scholarships: $_____

Earnings: $_____
(include summer jobs)

Other sources of aid: $_____

TOTAL: $_____

EMPLOYMENT HISTORY

Describe your work experience. Indicate dates of employment in each job and approximate number of hours worked each week. List your current job first.

Company/Position	Dates		Hours Per	Income
	From:	To:	Week	$ Hr/Annual

EXTRACURRICULAR INVOLVEMENT

List all school, community and volunteer activities in which you have participated. Indicate all special awards, honors, and offices held. Attach a separate sheet if necessary.

Activity	No. of Years	Awards & Honors	Offices Held

ENCLOSURES

Please include the following items to ensure your application is deemed complete:

1. **A typed essay answering 1.) How has the IHLAEF scholarship you received last year helped you reach your goals in the hotel and/or hospitality industry? 2.) What are you doing to advance your future in the hotel industry?**
2. **One letter of recommendation from an education professional, a current or former employer or industry professional.**
3. **Current official college transcripts.**

Applications must be fully complete and postmarked by May 2, 2012.
Incomplete applications will not be submitted for judging. The awarding of scholarships is the sole discretion of the IHLA Educational Foundation Scholarship Selection Committee. *Preference is given to those candidates who are interested in careers in the hotel industry.*

Please submit to:

IHLA EDUCATIONAL FOUNDATION
Attn: Jennifer Chase, Managing Director
27 East Monroe, Suite 1200, Chicago, Illinois 60603
Tel: 312-346-3135 ext. 233 jchase@ihlaef.org

CERTIFICATION

In submitting this application, I certify that the information provided is complete and accurate to the best of my knowledge. If requested, I agree to provide proof of the information that I have given on this form.

YOUR SIGNATURE:_____ DATE:_____

Thank you for completing this application. We look forward to reviewing your information and will be contacting you regarding your application status.