

HOSPITALITY HMG MEDIA GROUP LLC

DEDCOMAL INFORMATION

Applications due: July 1st, 2016 Submit all items by email*:

*Mailing address for letters or transcripts (if needed):

NEWH, Inc.

Post Office Box 322 Shawano, WI 54166

Questions contact: 800.593.NEWH

newh.scholarship@newh.org

newh.scholarship@newh.org

\$5,000 NEWH WOMEN LEADERS HOSPITALITY MANAGEMENT SCHOLARSHIP

Name:				
	last	first		middle
Current				
Mailing Address:				
	Ci	ty	state	zip
Permanent				
Mailing Address:				
	ci	ty	state	zip
Student Email				
at school:		Alternate Email:		
Cell:		Permanent Phone:		
Student ID:				
For privacy of	lo not list Social Securitv# (if vour	school uses your SSN# as your student ID	please only list la	st 4 numbers)

Qualifications/Scholarship Criteria:

Must be a currently enrolled FEMALE student attending an accredited college

Must have completed half the requirements for an undergraduate degree or be enrolled in a graduate

Must show financial need and have eligible outstanding debt for tuition, books or supplies at time of scholarship award in November 2016

Must have a minimum 3.0 GPA

Must be pursuing a career objective in: Hospitality Management

Must be able to attend the awards breakfast in New York City, November 2016, with airfare and lodging provided by NEWH, Inc.

Application and below items <u>must be received by deadline date</u>:

Student essay two pages double spaced in 12pt. Word file to include:

- Background of yourself and your experience
- Your goals and objectives after graduation 0
- o What prompted you to choose this career?
- Describe the contributions you have made to your school program or fellow students through leadership or participation
- Why is obtaining this scholarship important to you?
- If your application is not accepted, what plans do you have for financing?

Official Transcript (PDF email or mail separately)

Letters of recommendation from professor, advisor and/or department head (no minimum required) (PDF email or mail)

Letters from industry professionals, employers, etc. (PDF email or mail)

Headshot: professional & suitable for press items-no selfies (min 300 dpi high resolution JPG separate file)

Arizona – Atlanta – Atlantic City | Philadelphia – Chicago – Dallas – Houston – Las Vegas – Los Angeles Founding Chapter – New York – North Central – Northwest – Rocky Mountain – San Francisco Bay Area – South Florida – Sunshine – Toronto – United Kingdom – Washington DC Metropolitan

Regional Groups: New England – North Carolina – Orange County – Pittsburgh – Vancouver



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SCHOOL INFORMATION

Major:		
University/Cellege		
0.11.		
		_
city	state	zip
Advisor/Dept. Head:		
E-Mail:		
Degree Objective: Bachelor Gradua		
Anticipated year of graduation:		
Semester to apply scholarship funds towards: (spring		
Units required:		
Units completed:		
List classes taking in the current quarter/semester Class name	units	
Describe the consequent will be also on a standard	M	
Describe the career path you will seek upon graduat	uon:	
Professional organizations, extracurricular activities	, etc.	
- 		
Have you participated in an Independent or Student		
Company		
Do you feel such a program would be valuable?		



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ist be filled in co	ompletely			
Estimated income <u>during the academic year</u> (12 months) for which the scholarship is requested		Estimated expenses <u>during the academic year</u> (12 months) for which the scholarship is requested		
\$	Tuition and fees	\$		
	Books and supplies	\$		
\$	Housing	\$		
	Food	\$		
\$	Clothing, linen and lau	ndry \$		
	Personal Care	\$	_	
\$	Medical Care	\$		
\$	Transportation	\$		
\$	Child care	\$		
	Unusual expenses	(explain) \$	_	
\$				
\$	TOTAL E	EXPENSES \$		
	Applied		ded:	
	TOTAL AWARDS	\$		
arship recipient. I rec	ceived a scholarship from:	Yea	ır:	
·	Job Title	Dates	Hours per week	
	- AFRICA			
rship(s), I understand that funds f the scholarship award the fund ITY AND HOLD HARMLESS AGRE t, discharge and covenant not to ands, actions and causes of activhether caused by the negligenc	s will be sent to and directly distributed through r ds will be returned to NEWH, Inc. Awarded funds EEMENT. If I receive a NEWH Scholarship award(s ue NEWH, Inc., its Chapters, affiliates, officers ion whatsoever arising out of or relating to any lo be of the releasees, or otherwise, while participat	my school. I understand shall be utilized to help s), including the opportu s, directors, agents and oss, damage or injury, in	I if I do not have eligible debt for defray the cost of tuition, books, inity to attend a scholarship employees (hereinafter referred to cluding death, that may be	
	s s s s s s s s s s s s s	sharship is requested \$	Estimated expenses during the aca (12 months) for which the scholarship is requested \$ Tuition and fees \$ Books and supplies \$ Housing \$ Food \$ Clothing, linen and laundry \$ Personal Care \$ Medical Care \$ Medical Care \$ Transportation \$ Child care \$ Unusual expenses (explain) \$ \$ TOTAL EXPENSES \$ TOTAL EXPENSES \$ TOTAL EXPENSES \$ TOTAL AWARDS \$ TOTAL EXPENSES \$ TOTAL AWARDS \$ T	

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WALLTERS WALTERS