



Oklahoma Restaurant Association
SCHOLARSHIP APPLICATION

PERSONAL INFORMATION

All scholarship correspondence will be mailed. Please provide the address and phone number where you can be contacted. Please type or print clearly.

Social Security Number - -

Last Name First Name Middle Initial

Current Address

City State Zip

Phone Number Work Number

Email Address Anytime (Cell) Number

Oklahoma Resident? Yes No Sex: Male or Female

Parents Name Phone Number

Parents Address

City State Zip

Phone Number Work Number

*SCHOLARSHIP/PROSTART INFORMATION

(Circle one)

Must be completed by all applicants.

Are you a ProStart Certificate holder? Yes No

If yes, provide your Certificate number:

Are you a graduate of the ProStart program? Yes No

Are you a ProStart graduating high school senior? Yes No

Have you applied for a ProStart National Certificate of Achievement Scholarship? Yes No

If yes, were you awarded the scholarship? Yes No

Haven't yet received notice

Have you applied for a scholarship through the National Restaurant Association (NRA) Educational Foundation? Yes No

If yes, were you awarded the scholarship? Yes No

Haven't yet received notice

Have you been awarded or are you being considered for any other scholarships at this time? Yes No

If yes, which scholarship(s)?

Have you received a ORA scholarship in the past? Yes No

If yes, what year?



*See application letter

SCHOOL INFORMATION

A. Current Information

School Name _____

Address of Financial Aid Office _____

City _____ State _____ Zip _____

Financial Aid Office Phone Number (____) _____

Required date of funding at the institution _____

Expected Graduation Date _____

Major _____ Hospitality Administration- _____ GPA _____

(Circle one) Next term I will be a: Freshman Sophomore Junior Senior

at a: 2-yr College 4-yr College Culinary Arts Program Instructor

I plan to pursue/receive a: Certificate Associate's Bachelor's Master's

ACADEMIC HONORS & ACHIEVEMENTS

Include only those activities and honors received during the past two years.

Academic

Honors _____

Offices or Leadership Positions Held (date, organization, position) _____

Extracurricular Activities or Awards _____

Required Essay: * (refer to page 2 A. 3)

Please submit an essay explaining the following: your reason(s) for applying for a scholarship and why you feel you should receive one, the type of career in the foodservice or hospitality industry you plan to pursue, and your future goals. Your response should be at least 500 words, **typed and double-spaced.**

Attention:

Applications must be typed and mailed to the Oklahoma Restaurant Association: 3800 North Portland, Oklahoma City, OK 73122, before the due date.

No hand written, e-mailed or faxed applications will be accepted!



SCHOOLS ATTENDED

List in order beginning with most recent. Reminder: You must include a transcript (official or unofficial) with your application from current high school or college only.

School Name	City, State	Dates Attended	Degree Earned

HOSPITALITY INDUSTRY WORK EXPERIENCE

List paid or voluntary hospitality industry work experience. ONLY include hospitality related work experience, listing the most recent experience first.

Company Name, City, State, Telephone Number	Type of Business and Position	Date(s) Employed	Average Hours Worked per Month	Total Months Worked	Total Number of Hours*

**To calculate total hours, multiply average hours worked per month by total months worked.*

Total Hours Worked: _____



CHARACTER REFERENCES

Please identify three people who will complete the character reference letters. These references must be from 1) your sponsor, 2) employer, and 3) a teacher, educator, etc. and must be included with the application. No relatives please.

Name _____ Address _____ Phone _____
Name _____ Address _____ Phone _____
Name _____ Address _____ Phone _____

Please identify your sponsor. Your sponsor is an individual who is a mentor to you, and most likely the individual who was most influential in your decision to pursue a career in the foodservice/hospitality industry.

Name of Sponsor _____
Signature of Sponsor _____
Name of Business _____
Address _____ City _____ State _____ Zip _____

FINANCIAL INFORMATION

Expenses for one academic year:

School: In-State Out-of-State Private
Annual Tuition _____ Fees, Books, Supplies, Uniforms (*estimate*) _____

REQUIRED SIGNATURE

How did you learn about this scholarship?

Professor/School Internet Mailing Employer Other _____

Please read prior to signing.

I hereby certify that the information in this application is true and accurate to the best of my knowledge. I agree to report to the Oklahoma Restaurant Association any changes, which could affect consideration of my application. I understand that failure to provide valid and complete information could result in the withdrawal of financial assistance and recall any and all awards previously made by ORA. Furthermore, I understand that the decisions made by the Oklahoma Restaurant Association Scholarship Committee are final.

Signature of Applicant _____ Date _____

Signature of Parent or Guardian _____ Date _____
(only if applicant is under 18 years of age)

*** Applications must be postmarked no later than 5:00 p.m. February 23, 2007, the date posted in the application letter to qualify. An incomplete application will not be accepted. Notification will be made to all applicants by mail.**

If you have any questions concerning the application please call the ORA office at (800) 375-8181 or (405) 942-8181.

**Submit application to:
Oklahoma Restaurant Association 3800 N Portland Oklahoma City, Ok 73112**