Les Dames d’Escoffier
Chicago Chapter
Scholarships up to the amount of $5,000
PLUS a mentorship experience with some of Chicago’s leaders in the food industry

SCHOLARSHIP CRITERIA

- Women pursuing a career in the food, nutrition, wine or hospitality areas.
- Currently attending a full time academic program that results in a degree or certificate in a Chicago school such as French Pastry School, Kendall College, Robert Morris University – Institute of Culinary Arts, The Illinois Institute of Art at Chicago, Washburne Culinary Institute, College of DuPage, Triton College.
- Demonstrates financial need.
- Academics: High Cumulative grade point average, class participation, strength of recommendation letter.
- Involvement in special events, community service.

SCHOLARSHIP PROGRAM TIMELINE:

APRIL 1 – JUNE 15 APPLICATIONS ACCEPTED
JUNE 15 - JULY 31 SCREENING, FINALIST INTERVIEWS, FINAL SELECTIONS
AUGUST 15 SCHOLARSHIPS ANNOUNCED
AUGUST – date TBD AWARD RECEPTION (CASUAL)

APPLICANT CHECKLIST

____ Completed application turned into your school scholarship representative who will email as a word document to scholarships@lesdameschicago.org.

____ One letter of recommendation from an instructor.

____ A current transcript or current grade report(s) to date.

All paperwork must be attached with your name and school on each page. Return the completed application to your school contact to be approved and submitted before June 15, 2018. Incomplete applications will not be considered for scholarship awards. The application should be submitted by same contact to scholarships@lesdameschicago.org.
SCHOLARSHIP APPLICATION

PERSONAL INFORMATION

Name of Applicant: ____________________________________________________________

Home Address: ________________________________________________________________ Apt. # ______

City: ___________________________ State: ___________________ Zip: ______________

Day Phone ( ) Evening or Cell: ( ) ________________________________

E-mail ____________________________

Are you a full time culinary arts student currently enrolled at an accredited culinary school in the Chicago area? ____Yes ____No ____Part time

School you currently attend_____________________________________________________

Program enrolled in ___________________________ Anticipated graduation date _______

Plans after graduation __________________________________________________________

____________________________________ Course _________________________________

Name of current instructor _____________________________________ Course ____________

Other reference at your school __________________________ Position __________________

If you are a dependent of your parents, complete the following information:

Name of Parent(s): Mother: _________________________________________________

Father: __________________________________________________________

Home Address, if different: __________________________________________ Apt. # ______

City: ___________________________ State: ___________________ Zip: ______________

Day Phone ( ) Evening or cell: ( ) ________________________________

Total Household Annual Income: $ ____________

If you are independent, complete the following information:

Marital Status: ________________________ Number of Dependents: __________________

Spouse’s Occupation: __________________________ Spouse’s Annual Income: $ ____________

Total Household Annual Income: $ ____________

All of the above information is for the sole use of the Scholarship Committee and will not be given to any outside parties for any reason whatsoever without the applicants written permission. Make a copy for your records.
Why is this scholarship critical for you to advance your career?

Please tell us about yourself by addressing the bullet points below. Please submit as a word document (no longer than 1,000 words) along with this application.

- How has your culinary journey influenced your career decision? Please use meaningful achievements as examples.

- As a woman, what impact might you have on the food industry?

- Please tell us about your involvement in special culinary or community activities.

APPLICANTS STATEMENT OF VERIFICATION

I, the undersigned applicant, pledge that the information submitted in this application is true and correct to the best of my knowledge. I grant permission to contact my reference and instructor(s) at my school for information about my work performance and potential. In addition, I understand that, should I receive a merit scholarship, I will provide a photo as requested for use in press releases and other public relations that relate to the school I attend and Les Dames d'Escoffier.

SIGNATURE OF APPLICANT: __________________________ DATE: ______/_____/_____

All paperwork must be attached with your name and school on each page. Return the completed application to your school contact, to be approved and submitted before June 15, 2018. If you do not have a school contact, e-mail the completed application to scholarships@lesdameschicago.org.
$$$$ Scholarships for Women $$$$  

If You Are:  

- A woman pursuing a career in the food, nutrition, wine or hospitality business.  
- Have a financial need.  
- Are in good standing at your Chicago-area school.  
- Would like help pursuing your career in the culinary and hospitality world. 

Les Dames d’Escoffier offers scholarships of up to $5,000 yearly. Members of LDE Chicago will be at your school to introduce ourselves, the program and answer questions about the application process for 2018. 

For an application go to: lesdameschicago.org