



ASSOCIATION OF CATERING & EVENT PROFESSIONALS

SCHOLARSHIP APPLICATION

Date: _____

Name: _____

Address: _____

Employer: _____

Position Held: _____

Phone: _____

Fax: _____

Email: _____

Individual Member of ACEP Since: _____ (year) At least one year is required

Amount of scholarship fund requested (maximum \$750): \$ _____

Date(s) scholarship will be used: _____

Explain specifically what this scholarship will be used for and how the scholarship will assist with expenses.

The application will be scored according to the percentages possible for each category. Please provide complete answers.

20% Personal Participation

Describe the level of your personal participation in ACEP
(Be specific. i.e. attendance at meetings; offices held; committee chair positions held; committee participation; special projects such as Potluck in the Park)

20% Significant ACEP Contribution

What do you feel has been your most significant contribution to ACEP and describe how it benefited ACEP?

10% Why?

Why do you feel that you should be a scholarship recipient?

Please include a descriptive letter covering the following topics:

10% How will this scholarship award will help you in your career path, goals and objectives?

10% How this will enhance your future contribution to ACEP?

10% Any other pertinent information you would like the committee to know.

20% Provide two letters of recommendation.

One from a work related and one from a non-work related individual.

Application, essays and other required attachments must be typed. Attention is given to overall presentation. Application forms are available online at www.acep.com.

Submit four (4) complete sets (copies) of your application by Tuesday, October 20, 2009 to:

Don Richardson

ACEP Vice President

PO Box 1041, Brush Prairie, WA 98606

If you have any questions: don@digitalpopcorn.net or 360-907-7176