

Jeffrey R. Homko Scholarship Application



We are pleased that you are interested in applying for the Jeffrey R. Homko Scholarship. Scholarships are awarded based on academic accomplishments, references, goals, aspirations, initiative, and culinary-related experience.

Before you apply, please consider the following:

- Only full-time students are eligible to receive this scholarship.
- Scholarship funds may be used for tuition or program fees at JNA Institute of Culinary Arts. Checks will be issued only to the institution, and not to any individual, for such tuition and program fees. Funds may not be applied to living expenses.
- Your application must be handed to Amanda or Nicole on or before the posted due date.
- As part of the application process, the Scholarship Committee may request an interview either in person or by telephone.

Jeffrey R. Homko Scholarship Application

Please neatly handwrite or type your application.

LAST NAME

FIRST NAME

MIDDLE NAME

CURRENT STREET ADDRESS

CITY

STATE

ZIP CODE

E-MAIL ADDRESS

TELEPHONE

**List all scholarships and/or grants you currently hold:
(exclude any federal or state-based financial aid disbursed by the school)**

List all other scholarship and/or grants for which you have applied:

Education and Employment Record

Please include an up-to-date copy of your resume with your application. Please make sure your resume includes all of your educational background, including your program at JNA Institute of Culinary Arts and all of your employment history, including positions, employers, starting/ending dates, and duties.

Personal Essays

Please write two essays, each no more than 250-words (0.5 pages single-spaced or 1 page double-spaced), in response to the following questions:

1. Why have you chosen to study for a career in the food, wine, and/or hospitality field, and what do you hope to accomplish in your chosen career?
2. Describe an especially memorable culinary experience.

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Personal References (2)

1) _____
NAME

POSITION / TITLE

COMPANY

LENGTH OF ACQUAINTANCE

STREET ADDRESS

CITY

STATE

ZIP CODE

TELEPHONE

EMAIL

2) _____
NAME

POSITION / TITLE

COMPANY

LENGTH OF ACQUAINTANCE

STREET ADDRESS

CITY

STATE

ZIP CODE

TELEPHONE

EMAIL

Signature

To the best of my knowledge, all the information I have provided in the application is accurate and true.

APPLICANT'S SIGNATURE

DATE