

2025 SCHOLARSHIP APPLICATION Deadline to Apply: Thursday, April 17, 2025

Tops Friendly Markets is proud to partner with Taste of Buffalo, Inc. to award a \$1000 scholarship to a student pursuing a degree in Culinary Arts/Culinary Arts Management such as Nutrition & Wellness, Holistic Nutrition, Food Entrepreneurship, Food Retail Operations, Restaurant Operations, Food Science, Dietetics, Food Stylist, Food Photography, etc. The scholarship recipient will be selected based on the criteria and terms described on the last page of this scholarship application. Please select only one scholarship to apply for and complete this Tops Scholarship application or the Taste of Buffalo Scholarship.

(PLEASE PRINT) Name (Last) (First) (Middle) Address City State Zip Phone Date of Birth E-mail Address Father's Name Mother's Name **College/University Planning to Attend** Name Address City State Zip Have you applied for admission? [] Yes [] No Have you been accepted? [] Yes [] No What will be your major field of study? What degree are you seeking? Expected date of graduation? **Current High School Attending** School Address State Zip City

BACKGROUND (Attach additional pages if necessary) What special recognition, awards or honors have you received? Are you currently receiving any scholarship awards? [] Yes [] No If yes, describe: Amount: List any extracurricular activities in which you presently participate: List any community activities in which you are active: Please describe your career goals following your graduation: What kinds of contributions do you think you can make to the culinary arts/mgt. industry?

WORK EXPERIENCE (List most recent job first)	Dates of En	anlovment
Position Held		
Company		
Address		
City/State/Zip		
	Dates of En	nployment
Position Held		
Company	_	
Address	_	
City/State/Zip	_	
Are you planning to work part time while attending school?	[] Yes	[] No
If yes, number of expected work hours per week		
Please give any additional information you feel will help the selection including financial, academic, or personal information you wish to determine the selection including financial.		r decision,
(Attach additional page, if necessary)		
ADDITIONAL REQUIREMENTS		
 <u>Letters of Recommendation</u>: Submit TWO (2) letters of recommender someone who is not a relative, but who knows you and can position and study habits, and one (1) from your School Counselor or a Time Transcript/Report Card: Submit an official current high school recent report card. 	tively recommend eacher.	your work
I hereby certify that the information in this application is true and knowledge.	I accurate to the b	est of my
Date Signed(Applicant)		
(Applicant)		

Signature of Parent or Guardian _____

BE SURE TO COMPLETE THE ENTIRE APPLICATION, SIGN, DATE IT AND RETURN TO:

Cheryl Goldstone TOB Scholarship Chair 46 Haverford Lane Williamsville, NY 14221

CHECK BELOW TO BE SURE THAT YOU ENCLOSED ALL REQUIRED ELEMENTS:

[] Application for Scholarship (this form)
[] Two letters of recommendation (One personal; one from a High School Counselor or a Teacher)
[] Transcript from your High School and your most recent report card

Please send this application, letters of recommendation, transcript, and report card as one complete package. An incomplete application package will not be considered.

CRITERIA AND TERMS

Applicants must be residents of Erie, Niagara, Orleans, Genesee, Wyoming, Chautauqua, Cattaraugus, or Allegany counties in New York State and continuing their education in an accredited two or four-year school majoring in a Culinary Arts/Culinary Arts Management curriculum with plans to pursue a career path in Nutrition & Wellness, Holistic Nutrition, Food Entrepreneurship, Food Retail Operations, Restaurant Operations, Food Science, Dietetics, Food Stylist, or Food Photography to name a few. Scholarship recipients will be selected based on achievement, experience, enthusiasm, recommendations, school/community involvement, goals, and overall interest. Please complete <u>either</u> the Taste of Buffalo Scholarship <u>or</u> the Tops Scholarship.

The Scholarship Committee will choose one scholarship recipient. The recipient will receive a scholarship in the amount of \$1,000.00. **NOTE:** This scholarship is designated to be used for non-tuition college expenses, such as room/board, books, fees, etc. In order to receive the scholarship award, recipients will be required to provide proof of enrollment to the Scholarship Committee in the form of a tuition bill or a letter from the college of enrollment indicating that a tuition deposit has been paid.

The committee will choose alternates in the event that any of the recipients has a change in plans and does not enroll in a food service or hospitality program at an accredited two or four-year college or university. The scholarship recipients will be notified by e-mail and in writing no later than May 5, 2025. Scholarship recipients will be asked to sign a Publicity Release to grant permission to print their names, college plans and possible photographs on the Taste of Buffalo website and in the Taste of Buffalo festival guide distributed on tasteofbuffalo.com. Information about the recipient will also be sent as a news release to area media outlets.

Please contact Cheryl Goldstone, Scholarship Chair, at cherylmg46@gmail.com if you have any questions. Alternatively, you may contact Taste of Buffalo Event Coordinator, Connie Wendling, at 716-249-1189.

Your completed application package must be received on or before April 17, 2025.