



High School Culinary Challenge Scholarship Program

The scholarship/mentorship program is designed to recognize the accomplishments of Edmonton area high school students and to encourage these students to register in a Cook Apprenticeship Program.

The funds for the scholarships are provided by local contributions, sponsors and the Edmonton branch of the Canadian Culinary Federation.

To be eligible for a scholarship, you must:

- have competed in the CCF Edmonton High School Culinary Challenge
- are currently a Grade 12 student
- be a Canadian citizen or landed immigrant,
- be a resident of the Edmonton area

To be considered for a scholarship, your application package must include:

- A completed application form (attached)
- Two or three paragraphs telling us about yourself, confirming your plans to enter a cook trade apprenticeship program and why a career in this trade is a 'good fit' for you
- A character recommendation letter from someone who has known you for at least 3 years; **or**
 - a completed reference form (attached) from your employer
- A completed reference form (attached) from your high school food teacher

A committee made up of a representative of NAIT, the High School Culinary Challenge and the mentoring chefs will select the recipient(s). The committee will select recipients based on your information telling us about yourself and the letters of recommendation.

The complete application package must be received by February 19, 2017. Failing to do so will make you ineligible.

Mail completed applications to:

Simon Smotkowicz, Chair
High School Culinary Challenge
9797 Jasper Avenue
Edmonton, AB, T5J 1N9



Application Deadline – February 19, 2017



HIGH SCHOOL CULINARY CHALLENGE SCHOLARSHIP APPLICATION

To: Chair, High School Culinary Challenge

I hereby apply for one the High School Culinary Challenge Scholarships. I certify that I am eligible to apply, i.e. I am a Canadian citizen or landed immigrant, a resident of the Edmonton area, and have competed in the CCF Edmonton High School Culinary Challenge.

I further understand that:

- I will be interviewed by a committee made up of a representative of NAIT, the High School Culinary Challenge and the mentoring chefs, and their determination as to the recipient of the scholarship(s) will be final.
- I also further understand that the scholarship program is designed for indentured apprentices in the cook trade and that over the expected three years of apprenticeship I will be working in three establishments with a rotation of one year per establishment.
- Apprenticeship tuition fees will be paid yearly by the High School Culinary Challenge upon successful completion of the apprenticeship program of the previous year.

First Name	Initial	Last Name
------------	---------	-----------

Street Address

City	Province	Postal Code
------	----------	-------------

Tel: (Cell / Home)	Email
--------------------	-------

High School Name	Current Grade
------------------	---------------

Signature (Applicant)	Date
-----------------------	------

Signature (Parent / Guardian) (if applicant under 18 years of age)	Date
---	------



HIGH SCHOOL CULINARY CHALLENGE

Reference for _____

We are asking you to provide information on behalf of the individual identified above for the purpose of determining his/her suitability to participate in the High School Culinary Challenge scholarship program.

The scholarship covers the student's tuition, uniforms, knives and course materials for three years. Over the course of the three-year apprenticeship, the student will work and be mentored under a different chef chosen from among some of Edmonton's best chefs.

My perception of this student with respect to the following characteristics is:

	Excellent (Top 10%)	Above Average	Average	Below Average
Attendance				
Attitude				
Communication Skills				
Effort				
General conduct				
Punctuality				
Reliability				
Respectfulness				
Work habits				
Work quality				

Would you want this person to work for you? _____

Comments: _____

Name (please print): _____

Signature: _____ Date: _____

I am completing this form in the capacity of:

Teacher School _____ Phone: _____

Employer Company _____ Phone: _____

9797 Jasper Avenue, Edmonton, Alberta T5J 1N9 Phone 780-475-2433 Fax 780- 426-1874