





### RHODE ISLAND FOOD DEALERS ASSOCIATION 2016/2017 SCHOLARSHIP PROGRAM

Rhode Island Food Dealers Association is happy to announce the 2016-2017 Scholarship Program. The program has been established to add economic support and provide a value-added benefit to our members and their employees. The funding for this scholarship is raised annually at our annual Charitable Golf Tournament and other member events. This year's proceeds will allow us to offer scholarships to deserving students of our industry.

The scholarship program recognizes and aids deserving students who are related by virtue of their parent's or their own full or part time employment in our member companies. All candidates must be recommended by a member of the RIFDA. Winners will be honored at the RIFDA Annual Meeting and Holiday Gala on Saturday, December 3, 2016 at the Hyatt Regency Hotel in Newport, RI.



2015/2016 Scholarship Winners

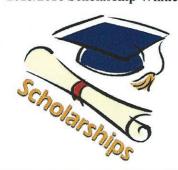
# **APPLY NOW**



2015/2016 Scholarship Winners







RIFDA SCHOLARSHIP AWARD HIGHLIGHTS

ONE TIME NON-RENEWABLE SCHOLARSHIPS OF \$1,000

APPLICATION AND REQUIRED INFORMATION MUST BE RECEIVED NO LATER THAN OCTOBER 28, 2016

THE AWARD RECIPIENTS WILL BE NOTIFIED BY NOVEMBER 21, 2016

WINNERS WILL BE HONORED AT THE RIFDA ANNUAL MEETING AND HOLIDAY GALA ON DECEMBER 3, 2016

IF YOU ARE INTERESTED IN THIS SCHOLARSHIP OPPORTUNITY. PLEASE CALL OR EMAIL RIFDA FOR AN APPLICATION. © 401-431-0880 EMAIL: SARTHURS@RIFDA.COM \* LWERY@RIFDA.COM

## Rhode Island Food Dealers Association 2016-2017

Scholarship Program Application SCHOLARSHIP DESCRIPTION







INSTRUCTIONS: Please complete the application in full and return along with the necessary supporting documents to Rhode Island Food Dealers Association offices by Friday, October 28<sup>th</sup>.

Supporting Documents that must accompany application:

- A recommendation letter from an active RIFDA Member.
- An additional outside recommendation (from teacher, guidance counselor, employer, coach, etc.)
- An essay of not more than 500 words outlining applicant's goals in attending post-secondary education including how this funding will contribute to this goal(s)

Note: Transcripts and additional letters of recommendation are suggested, but not required.

**Mailing Address:** 

RIFDA Scholarship Committee 450 Veterans Memorial Parkway Suite 801

East Providence, RI 02914

If you have any questions regarding this scholarship opportunity, please contact us.

Member Focused;

Results Driven

Steve Arthurs sarthurs@rifda.com Lisa Wery lwery@rifda.com

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## RHODE ISLAND FOOD DEALERS ASSOCIATION 2016-2017 SCHOLARSHIP FUND



Rhode Island Food Dealers Association is happy to announce the 2016-2017 Scholarship Program. The program has been established to add economic support and provide a value-added benefit to our members and their employees. The funding for this scholarship is raised annually at our Charitable Golf Tournament and other RIFDA member events. This year's proceeds from these events will allow us to offer scholarships to deserving students of our industry.

The scholarship program recognizes and aids deserving students who are related by virtue of their parent's or their own full or part time employment in the food industry. All candidates must be recommended by a member of the RIFDA. Winners will be honored at the Annual Meeting and Holiday Gala on December 3, 2016 at the Hyatt Regency Hotel in Newport, RI.

#### OVERVIEW

### OFFERING: RIFDA SCHOLARSHIPS (One-time non-renewable grants) GENERAL ELIGIBILITY: Requirements Include the Following:

- Candidate must be child of or employee of a Southern New England business directly active in the RI Food Dealers Association (minimum of six months employment required)
- Applicant must be endorsed/recommended in writing by a current RI Food Dealers Association Member
- Applicant must plan on attending an accredited two or four-year post secondary school in 2017 and has or will receive a high school diploma from an accredited institution.
- Aspirant must demonstrate financial need.

### APPLICATION PROCESS: All interested candidates must submit RIFDA Scholarship Application with supporting documents to RIFDA by Friday, October 28, 2016.

- ♦ Additional Supporting Documents Required:
  - \* A recommendation from RIFDA Active Member
  - An outside recommendation (i.e. teacher, guidance counselor, coach, etc)
  - Essay of not more than 500 words outlining applicant's goals in attending post secondary education including how this funding will contribute to this goal(s)
- Optional Documents
  - Verifiable High School Transcripts
  - Additional letters of recommendation
- Return application and supporting documents to:

RIFDA Scholarship Committee 450 Veterans Memorial Parkway Suite 801

East Providence, RI 02914

### SELECTION PROCESS: The RIFDA Scholarship Committee will review Applications and supporting documents and semi-finalist will be determined based on evaluation of these materials.

All semi-finalists will be notified and be required to participate in a brief interview with the committee between Monday November 7<sup>th</sup> and Monday November 14<sup>th</sup>.

- Evaluations based on the materials submitted and the interview process will be completed and final determination made.
- All decisions made by the scholarship committee based on tangible and intangible documents and evaluations will be final.
- Scholarship winners will be notified on or prior to Monday, November 21st
- ♦ Scholarships will be awarded on Saturday, December 3<sup>rd</sup> as part of the RIFDA Annual Meeting & Holiday Gala. The awardees' should arrive at the Gala for 5:30 pm.





#### Rhode Island Food Dealers Association 2016/2017 SCHOLARSHIP PROGRAM APPLICATION



INSTRUCTIONS: Complete Sections 1-4 of this application and mail to Rhode Island Food Dealers Association postmarked no later than Friday, October 28, 2016. Awardees will be notified by Monday, November 21, 2016. Please type or print in BLACK ink.

|   | Date of Application   |
|---|---|
| First Name  | Middle Initial Last Name  |
| Home Address  |   |
| City  | StateZip  |
| Email Address   |   |
| Date of Birth   | Home Telephone Number   |
| Year of High School Graduation  | on Cell Phone Number  |
| ELIGIBILITY-STORE OR CO   | OMPANY AFFILIATION  |
| EMPLOYER Name Store/Com<br>Address  | npany Employed At   |
| PARENT Name Store/Compan<br>Address   | ny Employed At  |
|   | lame  |
| FINANCIAL NEED  |   |
| College You Are Planning On A   | Attending:  |
| Address   |   |
| Tuition Costs & Fees: (Annual)  | )   |
| Tuition   | Books   |
| Room & Board  | Lab Fees, Etc   |
| Total Est. Cost \$  |   |
| ase list below the type and amount of<br>ns, campus-based aid and employmen | f aid that has already been offered to you (include scholarships, grannt) |



#### Rhode Island Food Dealers Association 2016-2017 SCHOLARSHIP PROGRAM APPLICATION



| NAME |  |  |  |
|------|--|--|--|
|      |  |  |  |

#### III. EDUCATION & BACKGROUND

List below all schools attended:

| Name of High School/College  | City, State, Zip                                       | Phone                | Attend         | ance Dates                      |
|--|--|----------------------|----------------|---------------------------------|
| 1  |  |                      | 20             | _ to 20                         |
| 2  |  |                      |                | _ to 20                         |
| What were your main areas of concentration   | on?  |                      |                |                                 |
| What were your best subjects?  |  |                      |                |                                 |
| Verifiable Evaluation Scores   | -  |                      |                |                                 |
| GPAH   | High School  | SAT Score:           |                |                                 |
| What degree/certificate will you be pursuing the work of the will you be pursuing the work of the work |  |                      |                |                                 |
| Please indicate your involvement in high s<br>thletics, dramatics, debate or oratory, sch  | chool activities such as:<br>ool publications, pep clu | class or school of   | fices, band or | orchestra,                      |
| Please indicate community involvement ar   | nd community service ac                                | ctivities            |                |                                 |
| Please list below the name of any award, he ecognition of outstanding achievement in   | onor, prize, and/or scho<br>high school.               | larship, etc. you ha | ave or expect  | to receive in                   |
| IV. SIGNATURE (certify that the information provided in the my knowledge, I understand that this infor Scholarship Committee and the staff of the  | mation will be shared w                                | ith the Rhode Islan  | ments are acc  | curate to the beers Association |
| Signature  |  | I                    | Date           |                                 |