The Erica J. Strausbaugh Culinary Arts/Food Science Scholarship Fund Through The Defiance Area Foundation 613 West Street St., Defiance, OH. 43512 Phone (419) 782-3130 www.defianceareafoundation.org

Erica J. Strausbaugh Culinary Arts/Food Science Scholarship Fund

Erica graduated from Tinora High School in 1997. She always had an interest and love of baking. In 1998 she attended Culinary Arts School at The Disney Institute and met and became connected with Johnson and Wales University. This launched her desire to attend that University and she graduated Magna Cum Laude in 2001. Tragically, she passed away less than three weeks after her graduation. The Strausbaugh Family established a scholarship fund in 2018 in her memory. An award of \$1,000 will be awarded annually. There is a \$500 renewable scholarship for the second year.

Eligible Applicants / Qualified Persons:

- Graduate from any Defiance County High School or Four County Vocational School
- Age 25 years old or younger
- Intend to graduate with a Degree in Culinary Arts, Food Science or Hospitality
- Note: If awarded, payment is made in December after completion of first semester

Application Information

Applications should be mailed to Defiance Area Foundation, 613 West Third St., Defiance, OH. 43512. Applications will be accepted with a **postmark no later than March 31**. The student will make application on the designated form that follows.

The Erica J. Strausbaugh Culinary Arts/Food Science Scholarship Fund 613 West Third Street, Defiance, OH. 43512 Phone (419) 782-3130 www.defianceareafoundation.org

<u>PART I – APPLICANT INFORMATION</u> – print or type

Name:last							
			first			midd	le
Permanent Address:		street	address				
		Street	address				
city					state		zip
Date of Birth:	_		S	ex:	\square M	\Box F	
Home Phone:	Cell Phone:						
High School:	School of Choice:						
			7'				
	C11	ty, State,	Zıp				
PART II – ACTIVITIES – atta	ch sepa	rate shee	t if necessary	y.			
Work Experience-List your wo	elz ovn	orionaa					
Employer	Start		Hours per			Duties	
	date	date	week			2 000	
Extracurricular Activities							
List campus activities in which y	ou have	e particip	ated during y	your y	ear(s) H	ligh School	
(e.g. music, clubs, theatre, stude	nt gove	rnment,	4-H etc.).				
Activity	No. of	Letter # Special Av		wards/Ho	onors/Offic	es held	
	years	of years	of years				
Sports Participation	. 1 . 1	. 1 1	1				
List the years you have participa				: -1 A -	 . /T.T.	/O.CC: -	1-11
Sport	No. of years	Letter # of years		Special Awards/Honors/Offices held		es neid	
	years	or years	2				

Community Service

List all community activities in which you have participated without pay during your year(s) in high school (e.g. church, volunteer, tutor, etc.).

Activity	No. of years	Special Awards/Honors/Offices held
PART III – APPLICATION CHEC		
Check the items you have included an date.	d provide an <u>exp</u>	lanation for any items that will be mailed at a later
☐ Current cumulative GPA		
☐ School Fee Sheet (attached)		
☐ Financial Aid Award letter (att	ached)	
☐ Financial Aid Summary indica	ting financial nee	ed (attached)
☐ Current annual cost of college	tuition, room and	board for a full-time student \$
history, unusual personal, family or fin	nancial circumsta	ou feel warrant special attention, including family nees or challenges. Please share where you might see school education. Attach this information, typed and
its Applicable Committees, for the sole purpose academic and/or financial records from any un academic and/or attendance records from any this application for the purpose of obtaining so	se of my being consiniversity or college, in high school that I hand in high school that I hand in high stated. Said consider of my bein stated. Said consider of my bein stated.	ove, and authorize the Defiance Area Foundation and/or any of dered for this award, to <u>contact</u> , <u>verify</u> and <u>obtain</u> any and all identified previously in this application and any necessary are attended. Further, I consent and approve the use of a copy of eu of an original and that same may be faxed, mailed, or e-ent and/or authorization is granted for the entire year in which
By affixing my signature to this applic	eation I verify tha	t all statements above are true.
		Date