

DOUG WALTERS MEMORIAL SCHOLARSHIP

PURPOSE: The Doug Walters Memorial Scholarship was established in 2008 to honor the memory of Doug Walters -- a professional chef who was passionate about friends, fun and food -- with the purpose of affording a deserving student from Fort Mill High School or Nation Ford High School the opportunity to continue his/her education after high school.

ELIGIBILITY: To be eligible, candidates shall be a graduating Fort Mill High or Nation Ford High School student who meets the following requirements:

| Shall be in the process of completing the Hospitality and Tourism |
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| curriculum cluster with a major in Culinary Arts; |
| Be in good academic standing; |
| Have been accepted at an accredited two or four-year institution of |
| higher learning or technical college, in pursuit of and/or having |
| selected a major of culinary arts. |

SELECTION PROCESS: A committee composed of a Fort Mill High or Nation Ford High School administrator, a guidance counselor, and a Culinary Arts t eacher shall review applications and select the recipient.

AMOUNT: One \$1,000 scholarship or two \$500 scholarships depending on the quality and quantity of nominations.

APPLICATION: Applicants are to submit a 250-word essay covering: "Who or what has influenced you to continue your education in a culinary arts field and how do you intend to serve your community with this career? What are your plans for education after high school? What are your career plans?" Return your application and essay to Guidance no later than **March 1, 2018.**

DISBURSEMENT: The scholarship check will be made payable and sent direct ly to the university or college upon receipt of the Student Scholarship Acceptance Form (provided at award notification). Recipients will be announced at the Fort Mill High School and Nation Ford High School Academic Awards in May.

Doug Walters Memorial Scholarship Application

| Name(print) | | | |
|---|-----------------------|---|-------|
| Address | | | |
| Phone Numbers (Home & | Mobile) | | |
| Email Address | | | |
| Parent's Names | | | |
| School of Study/Curriculus | m Cluster | | |
| Grade Point Average & SA' | Г/ACT Score | | |
| Food and Nutrition/ ProSt | art Courses, year, a | and grade received: | |
| Course | Year | Grade Received | |
| | | | |
| | | | |
| | | | |
| | | | |
| Extracurricular Activities (| (list or attach separ | rately) | |
| University, College or Tech | nnical School You P | lan to Attend | |
| | | | |
| | | | |
| I, (the applicant) do hereby application and associated | • | best of my knowledge the information on e and correct. | ı the |
| Signature of Applicant | | Date | |
| Signature of Parent | | Date | |