Dear Student,

Are you interested in Business, Marketing, Culinary Arts, Hotel/Lodging Management or Event Planning? Then you would be interested in the Hospitality Careers Academy!

You could be chosen to attend this week-long Academy. The Academy is sponsored by The Classic Center of Athens, Ga and The Ritz-Carlton Lodge at Reynolds Plantation.

Our Academy is a terrific summer opportunity for students that are interested in a career in Hospitality and Tourism. During the weeklong Academy, students will listen to guest speakers in the industry, participate in job shadowing and industry tours, and take part in team-building and leadership activities, all while working towards the culminating project that integrates the skills and information you have gained throughout the week.

The registration fee of $450 includes week-long accommodations at the Ritz Carlton and a hotel property in Athens, meals for the week and training from industry professionals. The Academy is sponsored by The Classic Center of Athens, Ga and The Ritz-Carlton Lodge at Reynolds Plantation in Greensboro, Ga. If you are able to obtain a mentor to sponsor you for the Academy, the mentor will be honored at the final luncheon at the end of the week.

How can you apply to be a part of this unique summer opportunity? Student acceptance will be based on a competitive process which includes: a completed application, an essay question, three recommendations, and a personal interview. We are looking for the future leaders in our industry.

If you would like to learn more about this fantastic opportunity, please contact Beth Turner at The Classic Center in Athens, Ga. for more details. Looking forward to meeting you soon!

Beth Turner
Hospitality Careers Academy Coordinator | The Classic Center
300 N Thomas St | Athens, GA 30601
706.357.4521 office | 706.548.0870 fax
Beth@ClassicCenter.com
www.ClassicCenter.com
Be Impressed
APPLICATION PROCESS

1. Please discuss this application with your teacher(s) or school counselor that is supporting you in applying for admission to the Academy. That teacher or counselor will need to fill out parts of this application and submit your file.

2. You must have:
   - Overall minimum GPA of 2.5
   - Acceptable attendance record (according to student’s school policy)
   - Acceptable discipline record (according to student’s school policy)

4. Submit a file containing the following:
   - Completed application
   - Completed records release form
   - Essay question
   - Professional resume
   - Three recommendation forms from teachers, employers or community representatives
   - School transcripts

5. Mail or email all student files to
   - Beth Turner
     Hospitality Careers Academy Coordinator
     300 North Thomas Street
     Athens, GA 30601
   - Beth@ClassicCenter.com
   - Application deadline is April 29, 2016

6. Students will have a final interview with the staff of the Hospitality Careers Academy

Tentative Academy Dates
July 11 through July 15, 2016

Dates will not be finalized until later in the spring semester
APPLICATION FOR THE
HOSPITALITY CAREER ACADEMY

Name
(First, Middle Initial, Last)

Date of Birth ______ / ______ / ______

Student’s Contact Number ______________________

Social Security _______ - _______ - _______

Program Affiliation ____________________________
(Pro-Start, DCT, DECA etc.)

Home Address
(Street or PO Box, City, State, Zip)

Parent(s)/Guardian(s) __________________________________ Phone __________________

Student’s E-mail Address __________________________________________________________

Parent/Guardian E-mail Address ____________________________________________________

Please check accordingly: ( ) Female  ( ) Male

School & County ____________________________________________ Grade _________
(Name of School, County, and Phone Number)

Teacher or Administrator assisting with application process _______________________

E-mail Address for teacher or administrator assisting ______________________________
List any school activities in which you have been involved: include community, organizations, and awards/honors. Attach separate sheet if more space is needed.

____________________________________________________________________________

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List your work, intern or volunteer experience, placing your current position first.

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<th>Employer &amp; Dates Employed</th>
<th>Supervisor &amp; Phone Number</th>
<th>Job Title</th>
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Student Agreement

I affirm, agree and/or understand that all statements on this form are true and accurate; any misrepresentation or omission of material facts may result in my being disqualified from the program.

(Date)

(Print) ___________________________ (Signature) ___________________________ (Date) ___________________________

Parent/Guardian Permission and Release

I agree to support my child’s participation in the Hospitality Academy Program and will ensure and accept the responsibility for transportation to/from The Classic Center in Athens, Georgia. I understand my child will be lodged at the Ritz Carlton from July 11-13, 2016 and a hotel in Athens from July 13-15, 2016. I also, hereby, consent to the use of my son’s/daughter’s photograph in articles and/or promotional materials directly related to the Hospitality Academy. **The above dates and locations may change based on availability.**

(Date)

(Print) ___________________________ (Signature) ___________________________ (Date) ___________________________
CONFIDENTIAL RECOMMENDATION FORM
FOR THE HOSPITALITY CAREERS ACADEMY

Student Name ___________________________________ Grade ___________________

School __________________ Evaluator Name & Position _______________________

The following checklist is provided for those who know the student well enough to give us an accurate assessment of him/her. We hope that it will provide a convenient method to describe the Candidate in summary fashion.

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<th>No basis for judgment</th>
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Please indicate any further explanation of the above ratings that you feel would be helpful for us to know in evaluating the above student for participation in the program:

____________________________________________________________________________
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Please check one:
☐ I recommend this student for participation in the Hospitality Careers Academy.
☐ I do not recommend this student for participation in the Hospitality Careers Academy.

_________________________________________ ________________________________
(Evaluator’s Signature) (Date)
CONFIDENTIAL RECOMMENDATION FORM
FOR THE HOSPITALITY CAREERS ACADEMY

Student Name ____________________________________ Grade __________________

School __________________________ Evaluator Name & Position ______________________________

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☐ I do not recommend this student for participation in the Hospitality Careers Academy.

_________________________________________ ______________________________
(Evaluator’s Signature) (Date)
CONFIDENTIAL RECOMMENDATION FORM
FOR THE HOSPITALITY CAREERS ACADEMY

Student Name ____________________________ Grade ______________________

School ________________________ Evaluator Name & Position ________________________

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Please check one:

☐ I recommend this student for participation in the Hospitality Careers Academy.
☐ I do not recommend this student for participation in the Hospitality Careers Academy.

_______________________________________                   ______________________________
(Evaluator’s Signature)                   (Date)

Recommendation #3
RELEASE OF RECORDS FORM
Please read carefully and be sure each line is correctly signed and dated

I affirm, agree and/or understand that all statements on this form are true and accurate; any misrepresentation or omission of material facts may result in my being disqualified or my being terminated from this program.

Applicant Name: ______________________ Signature ______________________________

Social Security _______ - ______ - _______

By making this application, I and my parents/guardians agree to the release of any necessity school records to the Hospitality Careers Academy Staff for the purpose of determining my eligibility. I/we understand and agree that such school records will be kept confidential and used only for determining admissibility to the Hospitality Careers Academy. **Students who do not agree to the release of such school records for determining admissibility will not be considered for the Hospitality Academy.**

Applicant Name: ______________________ Signature ______________________________

Parent/Guardian Signature __________________________________ Date ____________

I certify that to the best of my knowledge all of the information provided in this application is correct. I acknowledge that information about me may be used for public purposes if I am selected to attend the Hospitality Careers Academy. I recognize that the responsibility for arranging complete submission of these application forms is my responsibility. I authorize the school and its employees to release information necessary for this application.

Applicant Name: ______________________ Signature ______________________________

I have carefully reviewed the information on this application and give my permission for my son/daughter to proceed with application procedures. I authorize the school and its employees to release any information necessary for this application.

Parent/Guardian Signature __________________________________ Date ____________
ESSAY QUESTION

Directions: In a 500-word essay, please describe your career goals in the Hospitality Industry. Your essay should be double-spaced, 1-in. margins and Times New Roman font (12 pt). Each essay should have a cover page with the student’s name, school, teacher contact, and student’s phone number.

Please include:

Your area of interest (Marketing, Culinary, Events Planning, Restaurant Management, Human Resources, Hotel Management, Accounting, Recreations or Food & Beverage Management)

Any experience you may have in the Hospitality Industry

What course of action you plan to take to achieve your goals

Any other information you feel would be important
APPLICATION CHECKLIST
This checklist should be turned in with the completed packet.

☐ Completed and signed application form

☐ Completed recommendation #1

☐ Completed recommendation #2

☐ Completed recommendation #3

☐ Completed and signed Release of Records form

☐ School Transcripts

☐ Essay Question (500 words)
  *The essay must be typed, double-spaced, and in 12 point Times New Roman font.*

☐ Completed Professional Resume
  *Remember, volunteer work and community service may be considered employment*