



Application must be received by: **September 15<sup>th</sup>, 2015**  
 Submit items by email\* [newh.scholarship@newh.org](mailto:newh.scholarship@newh.org)  
 Mail or email \*Official Transcript/Letters: NEWH, Inc.  
 Post Office Box 322  
 Shawano, WI 54166  
 800.593.NEWH  
 Questions Contact: [newh.scholarship@newh.org](mailto:newh.scholarship@newh.org)

## THE NEWH/CLIFFORD R. TUTTLE \$5,000 SCHOLARSHIP APPLICATION

### PERSONAL INFORMATION

Name:			
	last	first	middle
<b>Current Mailing Address:</b>			
	city	state	zip
Permanent Mailing Address:			
	city	state	zip
Student Email at school:		<b>Alternate Email:</b>	
Cell:		<b>Permanent Phone:</b>	
Student ID:			
<i>For privacy do <u>not</u> list Social Security# (if your school uses your SSN# as your student ID please only list last 4 numbers)</i>			

### Qualifications:

- Must be a currently enrolled student attending an accredited college
- Must have completed half the requirements for an undergraduate degree or be enrolled in a graduate program
- Must show financial need and have eligible outstanding debt for tuition, books or supplies at time of scholarship award in November 2015
- Must have a minimum 3.0 GPA
- Must be pursuing a career objective in Interior Design for the Hospitality Industry

### Additional requirements must be included with your application:

- Student essay **emailed** in **WORD format**, to include:
  - Background of yourself and your experience
  - Your goals and objectives after graduation
  - What prompted you to choose this career
  - Do you feel you made a contribution to your school program or fellow students through leadership or participation
  - Why is obtaining this scholarship important to you
  - If your application is not accepted, what plans do you have for financing
- Official Transcript (*email from college or mail-must be official*)
- Letters of recommendation from Professor, advisor and/or department head (*email as a PDF or mail*)
- Letters from industry professionals, employers, etc. (*email as a PDF or mail*)
- Headshot **email** JPEG/PNG 300 dpi+(*no selfie or scanned images-professional photo suitable for magazine, social media, etc.*)

Arizona – Atlanta – Philadelphia|Atlantic City – Chicago – Dallas – Houston – Las Vegas – Los Angeles Founding Chapter – New York – North Central – Northwest – Rocky Mountain – San Francisco Bay Area – South Florida– Sunshine – Toronto – United Kingdom – Washington DC Metropolitan *Regional Groups:* New England – North Carolina – Orange County – Vancouver

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**SCHOOL INFORMATION**

Major: \_\_\_\_\_

University/College: \_\_\_\_\_

College Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_ city \_\_\_\_\_ state \_\_\_\_\_ zip

Advisor/Dept. Head: \_\_\_\_\_

E-Mail: \_\_\_\_\_ Phone: \_\_\_\_\_

Degree Objective *please circle:* Bachelor Graduate

Anticipated year of graduation: \_\_\_\_\_

Units required: \_\_\_\_\_

Units completed: \_\_\_\_\_

Units currently enrolled in: \_\_\_\_\_

List classes taking in the current quarter/semester

Class name	units
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Describe the career path you will seek upon graduation:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Professional organizations, extracurricular activities, etc.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Have you participated in a Student Intern Program \_\_\_\_\_

Company \_\_\_\_\_ Did you find it beneficial \_\_\_\_\_

Do you feel such a program would be valuable \_\_\_\_\_



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**FINANCIAL INFORMATION**

Estimated income <u>during the academic year</u> (12 months) for which the scholarship is requested		Estimated expenses <u>during the academic year</u> (12 months) for which the scholarship is requested	
Personal Funds <i>(cash, savings, etc.)</i>	\$ _____	Tuition and fees	\$ _____
Loans <i>(bank, etc., please specify)</i>	\$ _____	Books and supplies	\$ _____
Earnings while in school <i>(exclude college work study)</i>	\$ _____	Housing	\$ _____
Parental Support	\$ _____	Food	\$ _____
Spouse Income	\$ _____	Clothing, linen and laundry	\$ _____
Scholarship & Grants Awarded <i>(provide detailed information below)</i>	\$ _____	Personal Care	\$ _____
Other Income	\$ _____	Medical Care	\$ _____
		Transportation	\$ _____
		Child care	\$ _____
		Unusual expenses <i>(explain)</i>	\$ _____
<b>TOTAL INCOME</b>	<b>\$ _____</b>	<b>TOTAL EXPENSES</b>	<b>\$ _____</b>

Scholarships, Grants, Work-Study Grants and other Financial Aid applied for or received, attach separate page if needed:

	Applied for	Received	
1. _____	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
2. _____	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
3. _____	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
4. _____	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
5. _____	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
<b>TOTAL AWARDS</b>			<b>\$ _____</b>

Current amount of debt for tuition, books or supplies through my college: *(Student must have eligible debt through their college for tuition, books or supplies at time of scholarship award; awarded funds are sent to and made payable to winning student(s) college).* \$ \_\_\_\_\_

I am a former NEWH, Inc. Scholarship recipient. I received a scholarship from:  
 Chapter: \_\_\_\_\_ Year: \_\_\_\_\_

Work Experience: Company	Job Title	Dates	Hours per week
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

I have fully completed this application, supplied all necessary information accurately, included required attachments and submitted prior to the deadline date or my application will not be considered. I hereby verify that all financial information included in this application is true and accurate. I understand that if NEWH, Inc. learns that any information included in this application is false, this application will not be considered. If awarded a scholarship, I understand that funds will be sent to and directly distributed through my school. I understand if I do not have eligible debt for tuition, books or supplies through my school at time of the scholarship award the funds will be returned to NEWH, Inc. Awarded funds shall be utilized to help defray the cost of tuition, books, or supplies incurred by myself only. WAIVER OF LIABILITY AND HOLD HARMLESS AGREEMENT. If I receive a NEWH Scholarship award, including the opportunity to attend a scholarship awards event ("the Event"), I hereby release, waive, discharge and covenant not to sue NEWH, Inc., its Chapters, affiliates, officers, directors, agents and employees (hereinafter referred to as "releasees") from any and all liability, claims, demands, actions and causes of action whatsoever arising out of or relating to any loss, damage or injury, including death, that may be sustained by me, or to any property belonging to me, whether caused by the negligence of the releasees, or otherwise, while participating in the Event, or while in, on or upon the premises where the Event is being conducted, while in transit to or from the premises, or in any place or places connected with the Event.  
 I agree to the above terms. If chosen as the winner, I will be able to attend the Platinum Circle awards in New York on November 10<sup>th</sup>, 2015, to accept the \$5,000 scholarship award with my travel and lodging paid for by NEWH, Inc.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_