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**Membership Application Form**

**A. Personal Data**

First and Last Name:

Job Title:

Business Name and Description:

Preferred Mailing Address:

Primary Phone:             Business Phone:

Email:            Website:

Professional Bio (50 words approximately):

Why do you wish to become a member of Les Dames d’Escoffier, LDEI-DC Chapter?

What contributions do you feel you can make to LDEI-DC?

Have you participated in any LDEI events (please list)?

**B. Education** (*include all food, beverage, and hospitality training*)

**School 1** Name/City/State:

Dates Attended:            Degree/Diploma/Certificate:

**School 2** Name/City/State:

Dates Attended:            Degree/Diploma/Certificate:

**School 3** Name/City/State:

Dates Attended:            Degree/Diploma/Certificate:

Other:

**C. Professional Experience** (Begin with current/most recent position)

**Total years** in food, restaurant, and/or hospitality industries:

**Current Employer** Name/City/State:

Position:       Date Started:           Date Ended:

Employer Name/City/State:

Position:       Date Started:           Date Ended:

Employer Name/City/State:

Position:       Date Started:           Date Ended:

Employer Name/City/State:

Position:       Date Started:           Date Ended:

Employer Name/City/State:

Position:       Date Started:           Date Ended:

Employer Name/City/State:

Position:       Date Started:           Date Ended:

**D. Professional Goals** (Please explain goals and describe any professional experiences that distinguish you in your field)

**H. Current Memberships** (Professional associations; food, beverage, and hospitality societies. Please include any offices or board positions)

1.

2.

3.

4.

**J. Publications** (Books, articles, and other publications you have written, edited, or in which you have been featured)

Title of book or publication:       Date or issue:

Title of book or publication:       Date or issue:

Title of book or publication:       Date or issue:

Title of book or publication:       Date or issue:

Title of book or publication:       Date or issue:

**K. Honors and Awards** (please include dates)

**L. Sponsor/Professional References** (Two are required; One must be a Les Dames D.C. Member)

Name:            Email Address:            Phone:

Name:            Email Address:            Phone:

Please send digital references to Stacey@tastingsgourmetmarket.com or hard copy references to: Stacey Adams 3602 Willow Birch Drive Glenwood, MD 21738

M. Committee Preferences (please select one or more):

[ ]  Educational Programs [ ]  Scholarships-Mentoring Program

[ ]  Fundraising Events [ ]  PR-Communications

[ ]  Grants [ ]  Newsletter

[ ]  Leadership-Strategic Planning [ ]  Website-Social Media

Please send your completed application, resume, and TWO letters of recommendation (one of which must be a DC Dame) along with a $25.00 check made to LDE-DC to: Stacey Adams 3602 Willow Birch Drive Glenwood, MD 21738

For electronic applications, email the above documents (application, resume, two rec letters) to Stacey@tastingsgourmetmarket.com Use Eventbrite link for fee (includes additional service charge): [click here](https://www.eventbrite.com/e/2019-new-member-application-fee-tickets-55282654909)

Questions? Please email me at Stacey@tastingsgourmetmarket.com or TEXT 410-212-2224.