



# Texas Chefs Association

## Chef Relief Application

*It is our mission to promote the culinary profession and make a positive impact for culinarians through education and certification; while creating a fraternal bond respect and integrity among culinarians in Texas.*

### **Objective:**

To distribute Chef Relief funds to a TCA member who has suffered loss of income, personal unforeseen hardship due to illness, natural disaster, personal property damage or personal injury.

### **Fund Qualifications:**

1. The TCA Local Chapter from which the applicant is a member, must be in good standing as outlined in Article VIII, Section 2-K of the Bylaws of the Texas Chef's Association, Inc.
2. The TCA Member must be in good standing at the time that their Chef Relief Fund application is submitted.
  - 2.1. A TCA member with less than three consecutive years of membership shall be eligible for a maximum of \$250 distribution
  - 2.2. A TCA member with more than three consecutive years of active membership shall be eligible for a maximum of \$500 distribution
3. The applicant shall provide a request in writing detailing the need for Chef Relief Fund distribution.
  - 3.1. The request must be accompanied by a letter of approval and recommendation, from the local Chapter Director, of the applicant's fulfillment of membership obligations as outlined by Article IX, Section 5 of the Bylaws of the Texas Chef's Association.
  - 3.2. The request must be accompanied by a letter of recommendation from an industry peer or employer describing the personal situation leading to the request for Chef Relief Fund distribution.
4. The distribution of funds shall be based on availability of funds and applicant needs
5. Funds shall be available to an applicant no more than once every three years

### **Application Procedure:**

1. Applicant shall submit written request to Local Chapter Director.
2. Chapter Director shall review request and submit it along with required letters of recommendation to TCA State Office.
3. A review committee consisting of TCA 1<sup>st</sup> Vice President, Chairman of the Board, and Community Outreach Chair shall review application.
4. Upon approval, the TCA State Office will distribute Chef Relief funds directly to applicant.

**Applicant Name:** \_\_\_\_\_ **TCA Chapter:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Full Address:** \_\_\_\_\_

**Please describe your local TCA Chapter involvement over the past year:**

**Please provide a specific description for why you are applying for Chef Relief funds:**

**Chapter Director Signature** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Chef Relief Applicant Checklist:**

Completed Chef Relief application with all applicable signatures

Letter of approval from local Chapter Director

Letter of description from applicant's employer or industry peer

**Chef Relief State Office Checklist:**

Applicant has less than three years of consecutive membership (\$250 qualification)

Applicant has three or more years of consecutive membership (\$500 qualification)

Applicant is in compliance with TCA Code of Conduct according to Article IX, Section 5 of the TCA Bylaws

Applicant's local Chapter is in compliance with Article VIII, Section 2-K of the TCA Bylaws, requiring local Chapters to tithe annually to a TCA Restricted Accounts

**Reviewed by:**

_____	_____	_____	_____
<b>Chairman of the Board</b>	<b>Date</b>	<b>Approve</b>	<b>Deny</b>
_____	_____	_____	_____
<b>TCA 1<sup>st</sup> Vice President</b>	<b>Date</b>	<b>Approve</b>	<b>Deny</b>
_____	_____	_____	_____
<b>Community Outreach Chair</b>	<b>Date</b>	<b>Approve</b>	<b>Deny</b>