2019 OUTSTANDING DIETETICS STUDENT

AWARD
DATA SHEET

Academy of Nutrition and Dietetics

STUDENT

Submit the recipient's name and credentials as it should appear on the certificate and in the *Journal*.
All fields are required.

Academy Membership number: _____

Name: _____ _____ _____
First middle initial last

Home Address: _____ _____ _____ _____
street city state zip

Home Phone: (____) _____ E-mail address _____

STUDENT'S CURRENT EDUCATIONAL PROGRAM

Institution: _____ City/State _____

Dietetics Education Program Type: CP _____ DI _____ DPD _____ DT _____

ACTIVITIES AND HONORS

Briefly list achievements including: honors (academic and other), student dietetic association activities, community service activities, etc.

Activities, Honors, or Organizations: Dates

_____

_____

_____

_____

_____

Affiliate: _____

Affiliate Contact: _____

STUDENT NOMINATIONS

All nominees must be Academy student members by January 1st 2019.

Students must supply their membership number; membership identification numbers will not be provided to third parties (i.e., educators).

Complete this form and submit to the state association award chair or other individual designated by the state association.