



Genesee Dietetic Association

P.O. Box 22724
Rochester, NY 14692

585-234-5959
www.eatrightgda.org

Genesee Dietetic Association Nancy DeMuth Ruhle Scholarship Application 2011 - 2012

1. PERSONAL DATA

a. Name: Mr./Ms. _____
Last First MI

b. Telephone: () _____ email: _____

c. Address _____

2. EDUCATION PROGRAM CATEGORY

Check only one box for the program you are enrolled in for 2011 – 2012.

- Dietetic Technician Program
- Baccalaureate – Didactic Program
- Baccalaureate – Coordinated Program
- Dietetic Internship
- Graduate Program

3. EDUCATION

List all colleges and universities attended or currently attending, **with most recent first.**

<u>School</u>	<u>Major</u>	<u>Dates of Attendance</u>	<u>GPA</u>	<u>Degree Received</u>

4. WORK EXPERIENCE

Job Title	Employer	Date Mo/Yr – Mo/Yr	Full-time Part-time (F/P)

5. PROFESSIONAL MEMBERSHIPS and ACTIVITIES

Describe how you have participated or plan to participate in GDA or other nutrition-related organizations.

6. COMMUNITY SERVICE and/or EXTRACURRICULAR ACTIVITIES

Date (s)	Activity and/or Service

7. COLLEGE ACTIVITIES, ACHIEVEMENTS, and HONORS

a. List college activities, personal accomplishments, and/or scholastic achievements for which you have been awarded, honored, or received special recognition.

8. CAREER GOALS

a. What area/domain of nutrition do your professional goals relate to? (i.e. clinical, food management, community, consultation, education and research, other)

8. b. Describe your professional goals. (please describe in 100 words or less)

9. FINANCIAL

Describe how this scholarship money would be used. Include any special circumstances regarding your personal financial situation.

10. LETTERS OF REFERENCE (List contact name and phone number)

1. _____
2. _____

11. Signature

All information in this application is true and complete to the best of my knowledge.

Signature of Applicant _____ Date _____