**2020 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: honors (academic and other), student dietetic association activities, community service activities, etc.

Activities, Honors, or Organizations: Dates

_____

_____

_____

_____

_____

## STUDENT NOMINATIONS

- All nominees must be Academy student members.
- 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.