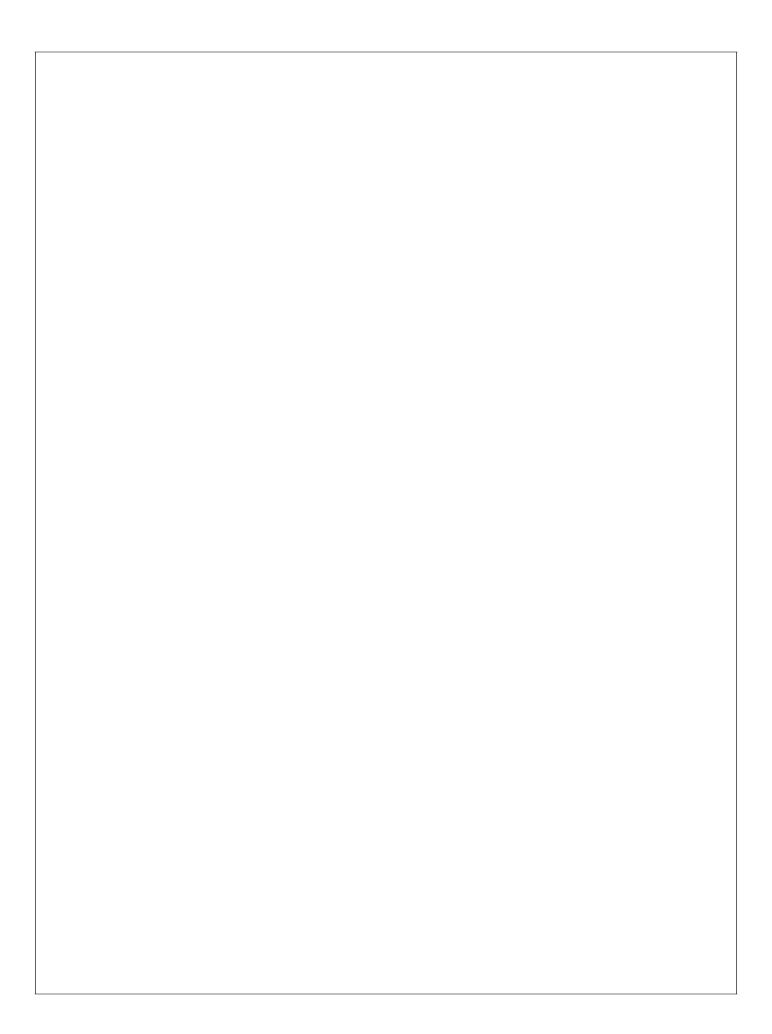
1.			
Please complete the	application completely.		
* 1. Please enter your	information:		
Name:			
Company:			
Address:			
Address 2:			
City/Town:			
State:	select state		
ZIP/Postal Code:			
Country:			
Email Address:			
Phone Number:			
0 V			
Your Academy men	nbersnip number:		
3. RYDY candidates r	3. RYDY candidates must be 35 years or younger as of 5/1/2021.		
Please enter your birth date	3.		
Date			
MM/DD/YYYY			
4. Please enter your e	education information.		
Highest degree completed			
Date of highest degree			
Institution			
City/State			
Current education in progress			
City/State			



Demonstration of Leadersh	nip
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This is a summary of leadership activity in each of 10 focus areas. Use the outline below to type a narrative summary of your activity or interest in each of the 10 focus areas. For each area, you must clearly separate activities that were job related from those that were volunteer. Each focus area should consist of no more than 1-2 paragraphs. Please include all focus areas in your outline. If no activity in a specific area, simply indicate N/A on your outline.

* 1. Career Guidance: Volunteer	
* 2. Career Guidance: Job Related	
Zi Gardor Gardanos dos resistas	
* 3. Community Service: Volunteer	
* 4. Community Service: Job Related	
* 5. Education: Volunteer	
5. Ludcation. Volunteer	
* 6. Education: Job Related	
* 7. Legislation/Policy: Volunteer	
• ····································	

* 8. Legislation/Policy: Job Related	
* 9. Management: Volunteer	
* 10. Management: Job Related	
]
* 11. Clinical Dietetics: Volunteer	
* 12. Clinical Dietetics: Job Related	
* 13. Public Relations: Volunteer	
* 14. Public Relations: Job Related	
* 15. Research: Volunteer	

* 16. Research: Job Related	
* 17 Dublications Valuntary	
* 17. Publications: Volunteer	
* 18. Publications: Job Related	
* 19. Other: Volunteer	

* 20. Other: Job Related	1

3. Demonstrated Leadership (Organizations) - Elected	
Please enter any elected positions for each section and the dates served. *Be very clear about the dates (in years). For example: President (6/2014 - 5/2015)	
1. Academy of Nutrition and Dietetics	
Washington State Academy of Nutrition and Dietetics (or othe state affiliate)	
3. District Dietetic Association	
4. Other Professional Associations	

4. Demonstrated Leadership (Organizations) - Appointed	
Please enter any appointed positions for each section and the dates served. *Be very clear about the dates (in years). For example: President (6/2014 - 5/2015)	
1. Academy of Nutrition and Dietetics	
2. Washington State Academy of Nutrition and Dietetics (or othe state affiliate)	
3. District Dietetic Association	
4. Other Professional Associations	

5. Other		
1. Please add any otl	ther information that supports the nomination for RYDY.	
2. Please submit info employer).	ormation regarding your employer (if you are selected, a letter will be se	nt to your
Supervisor Name:		
Supervisor Title:		
Organization:		
Address:		
Email Address:		