

1.

**Please complete the application completely.**

**All materials must be completed by midnight on January 31, 2025 for consideration.**

1. Submitted by:

\* 2. Please enter your information:

**Name:**

**Address:**

**Address 2:**

**City/Town:**

**State:**

**ZIP/Postal Code:**

**Country:**

**Email Address:**

**Phone Number:**

3. Are you a current Oregon Academy member?

Yes

No

4. Your Academy #:

5. Please upload your CV/resume here.

Choose File

Choose File

No file chosen

6. Please enter your education information.

Highest degree completed

Date of highest degree

Institution

City/State

## 2. Demonstrated Leadership (Organizations)

**Please enter your leadership volunteer and/or elected positions for each section and the dates served.**

**Please indicate whether each position was elected or appointed.**

**NOTE: Please provide the information as a short, bulleted list.**

1. Oregon Academy of Nutrition and Dietetics

Note that participation in the Oregon Academy is scored higher than other leadership involvement.

2. Total years for the above section

3. Other State/Affiliate Association(s) (e.g., Washington State, Idaho, California, etc.)

4. Total years for the above section

5. Academy of Nutrition and Dietetics

6. Total years for the above section

7. District Dietetic Association

8. Total years for the above section

9. Other Professional Associations

10. Total years for the above section

### 3. Demonstration of Leadership

**This is a summary of leadership activity in each of 6 focus areas. Use the outline below to provide a bullet-point summary of your activity or involvement in each of the 6 focus areas.**

**Include dates of the activity/involvement and total years of involvement for each activity.**

**For each area, you must clearly separate activities that were job related from those that were volunteer.**

**NOTE: Information should be entered in one focus area only - do not repeat information in other sections.**

**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 & Education: Volunteer

The 2 sections on career guidance and education refers to teaching or presentations in an educational setting, mentoring, and presentations to students and/or other groups outside an educational setting.

2. Total years for the above section

\* 3. Career Guidance & Education: Job Related

4. Total years for the above section

\* 5. Community Service, Legislation/Policy and Public Relations: Volunteer

The 2 sections refer to activities within the community (for example, providing guidance to a food bank), activities related to policy, advocacy, work on legislative initiatives, and/or public relations activities (promoting the RD or National Nutrition Month® as examples).

6. Total years for the above section

\* 7. Community Service, Legislation/Policy and Public Relations: Job Related

8. Total years for the above section

\* 9. Management: Volunteer

These 2 sections refer to administrative and management activities related to teams of people and/or projects.

10. Total years for the above section

\* 11. Management: Job Related

12. Total years for the above section

\* 13. Clinical Dietetics: Volunteer

These 2 sections refer to clinically-related activities.

14. Total years for the above section

\* 15. Clinical Dietetics: Job Related

16. Total years for the above section

\* 17. Research: Volunteer

These 2 sections refer to research-related activities.

18. Total years for the above section

\* 19. Research: Job Related

20. Total years for the above section

\* 21. Publications: Volunteer

These 2 sections refer to activities involving writing and editing.

22. Total years for the above section

\* 23. Publications: Job Related

24. Total years for the above section

\* 25. Other: Volunteer

26. Total years for the above section

\* 27. Other: Job Related

28. Total years for the above section

## 4. Other

1. Please add any other information that supports the nomination for EDL.

2. You can upload a letter of reference here.

Choose File

Choose File

No file chosen

3. Please submit information regarding your employer (if you are selected, a letter will be sent to your employer).

Supervisor Name:

Supervisor Title:

Organization:

Address:

Email Address:

4. Please submit information regarding your home town newspaper(if you are selected, information/a press release will be sent to your newspaper).

Newspaper Name:

Business news editor  
email address:

Website: