Please complete the application completely and submit by no later than February 18, 2021.

1. Submitted by:

* 2. Please enter the NDTR's information:

Name:	
Company:	
Address:	
Address 2:	
City/Town:	
State:	select state
ZIP/Postal Code:	
Country:	
Email Address:	
Phone Number:	

3. Candidate's Academy #:

4. Please enter the education information.

Highest degree completed	
Date of highest degree	
Institution	
City/State	
Current education in progress	
City/State	

1.

2. Demonstration of Leadership

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

* 3. Community Service: Volunteer

* 4. Community Service: Job Related

* 5. Education: 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. Publications: Volunteer

* 18. Publications: Job Related

* 19. Other: Volunteer

* 20. Other: Job Related

3. Demonstrated Leadership (Organizations)

Please enter any volunteer and/or elected positions for each section and the dates served.

1. Academy of Nutrition and Dietetics

2. Oregon Academy of Nutrition and Dietetics (or othe state affiliate)

3. District Dietetic Association

4. Other Professional Associations

4. Other

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

2. 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:	

3. 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:	