2019 Ann Litt Graduate Student Award



Recognizes the emerging leadership and achievement of graduate students in nutrition, public health, or an ACEND-accredited coordinated program and encourages their participation in DC Metro Academy of Nutrition and Dietetics.

Criteria for Selection

- 1. Pursuing a graduate degree at an accredited school in VA, DC, MD, or online in the field of nutrition or public health with the intention of working in nutrition after program completion *OR* enrollment in an ACEND-accredited coordinated program in VA, DC, or MD resulting in a master's degree
- 2. Demonstrated commitment to the field of nutrition
- 3. Demonstrated academic achievement
- 4. Demonstrated leadership and professional potential

Award Recognition

- 1. Congratulatory letter from DCMAND President
- 2. Recognition and presentation of certificate at DCMAND annual meeting
- 3. Recognition on DCMAND website and Potomac Post

Award application packets should include a completed checklist, letter of application, resume, and letter of recommendation, which are submitted to nominating@eatrightdc.org. no later than Friday, March 15th, 2019. The *letter of application* should be no more than 2 pages long and include the following information: experiences and/or qualifications that make you an exceptional student or intern; commitment to the field of nutrition; and career goals and aspirations. The *letter of recommendation* should be written by a program director, professor, student advisor, employer, or volunteer supervisor.

Recipients are required to volunteer with DCMAND within 12 months of receiving the award. The award will be distributed as follows: \$500 upon receiving the award and the remaining \$500 after completion of the required volunteer work with DCMAND. During the year following the award, award recipients must log 5 hours per month of volunteer work with DCMAND or serve in a position or committee on the DCMAND Board of Directors.

Ann Litt Graduate Student Award Application Checklist

Please place a checkmark next to each item on the list indicating that the item has been included in your application packet. Fill out the information at the bottom of the sheet and sign the bottom of the checklist. Include this sheet with all of the documents included in your application packet. Incomplete application packets will not be considered. All application packets must be submitted to nominating@eatrightdc.org no later than **Friday, March 15**th, **2019.**

Letter of applica	tion
Resume	
Letter of recomm	nendation
Name:	
E-mail address:	
Phone number:	
Program name:	
Program director:	
Director's email addre	ess:
Director's phone numl	ber:
Name of individual wri	iting your letter of recommendation:
Relationship with the individual writing your letter of recommendation (e.g. program/internship director, advisor, supervisor, etc.):	
Email address of indiv	vidual writing your letter of recommendation:
Phone number of indiv	vidual writing your letter of recommendation:
-	
I certify that all of the i	information in this application is accurate to the best of my knowledge.
Signature:	Date: