



DIETARY MANAGERS ASSOCIATION FOUNDATION 2010 CONTINUING EDUCATION SCHOLARSHIP APPLICATION

Scholarships for attendance at DMA Annual and Regional Meetings are available for Dietary Managers who are currently or recently employed in a non-commercial foodservice workplace. Scholarships are intended to be used for financial assistance to enable the recipient to offset registration fees and travel expenses. Two types of scholarships will be awarded:

\$500 scholarships for attendance at DMA Annual Meetings.
\$250 scholarships for attendance at DMA Regional Meetings

PLEASE NOTE: Scholarship to be used toward registration fee and hotel room costs only. Recipients must stay in DMA room block at headquarters hotel.

ELIGIBILITY REQUIREMENTS

- ◆ Applicant must be a member of DMA in good standing.
- ◆ Applicant must be currently employed or seeking employment in a non-commercial foodservice workplace.
- ◆ Applicant must demonstrate need for financial support
- ◆ Applicant may qualify for one scholarship during a five-year cycle. After initial scholarship is awarded, recipients may reapply in five years.

APPLICATION REQUIREMENTS

Please only include information that has been requested. Any applications that do not meet the following criteria or are illegible will be disqualified.

- ◆ Answer every section. Mark N/A if a section does not apply to you. A blank space will automatically be considered an incomplete application.
- ◆ Must provide two letters of recommendation, from any of the following:

**Supervisor or former Supervisor
Administrator or other department Supervisor
Consulting dietitian
DMA State Chapter or district leader/officer**

- ◆ Application must be returned by the published deadlines.

DEADLINES

- ◆ Applications for the Spring 2010 DMA Regional Meeting Scholarships must be submitted by March 8, 2010.
- ◆ Applications for 2010 DMA Annual Meeting Chicago must be submitted by April 1, 2010.
- ◆ All applicants will be notified by mail.
- ◆ If you are unable to submit application electronically, send written applications and attachments to:

- **DMA Foundation
Attn. Marla Isaacs
406 Surrey Woods Drive
St. Charles, Illinois 60174**

Questions? Please contact Marla Isaacs at (800) 323-1908, or misaacs@dmaonline.org.



2010 DMA SCHOLARSHIP APPLICATION

SECTION 1 – TYPE OF SCHOLARSHIP

Please check off the type of scholarship for which you are applying:

\$500 Chicago Annual Meeting Scholarship – July 4-8, 2010

\$250 Harrisburg, PA Spring Regional Meeting Scholarship – April 8-9, 2010

SECTION 2 – PERSONAL INFORMATION

DMA Member ID number _____

Last Name _____ First Name _____ MI _____

Permanent Address _____

City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____

Email Address _____

SECTION 3– EMPLOYMENT INFORMATION

Are you currently employed in a non-commercial foodservice operation?

Yes No

If no, how long have you been unemployed or working in a different setting, and please explain your efforts in actively pursuing employment? (attach separate sheet if necessary)

If you are currently employed, complete the following section.

Current Employer _____

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____

Email Address _____

Name of Immediate Supervisor _____ Phone _____

SECTION 4 – INDUSTRY WORK EXPERIENCE – *please list, starting with your most recent position.*

Company Name, City, Phone	Type of Business & Position	Duties

SECTION 5 – PERSONAL QUESTIONS (attach extra sheets if necessary)

- 1. Are you a member of any other professional organizations (not including a DMA state or district chapter)? If yes, please list. If not, why not?**

- 2. What has been your involvement in your DMA state or district chapter (i.e. offices held, attendance at meetings, committee work)?**

- 3. Does your employer contribute financially toward continuing education for you or other employees? If yes, please give an example.**

4. **This scholarship will only fund part of your attendance expenses. How do you plan to pay for the remaining expenses? Will your chapter support remaining expenses?**

5. **Give an example of a past meeting you have attended, DMA or otherwise, and how that experience benefited your workplace and/or your DMA chapter/district?**

6. **Have you ever been awarded a scholarship or grant from the Dietary Managers Association, DMA Chapter or District, or other sponsor for educational purposes?**
 Yes No
If yes, please give date, details and amount of award.

SECTION 6 – ESSAY

Please type an essay of approximately 200 words that summarizes the following:

How will this scholarship benefit you, your place of work, those you serve, and the industry in general? How will you take what you learn and apply it to your workplace? Explain your follow-up plan for applying principles learned at this meeting.

SECTION 7 – SIGNATURES

Please read before signing

To the best of my knowledge, I have provided the Dietary Managers Association Foundation accurate information concerning all questions on this application. I understand that failure to provide valid and complete information could result in the withdrawal of all financial assistance and a recall of all awards previously made by the DMA Foundation.

Signature of Applicant _____ Date _____

Signature of Supervisor _____ Date _____

Before you submit this application, did you include:

___ **Every section of the application is completed; application signed and dated.**

___ **Section 6 Essay attached.**

___ **2 Letters of Recommendation from listed sources attached.**

For DMA Office Use Only:

Date received: _____ ***Staff reviewed:*** _____

Sent to committee: _____

Amount of Financial Assistance Awarded: _____