

TSNA Industry Scholarship  
Application 2011

EMPLOYEE and DEPENDENT APPLICATION

Applicant Information

Applicant is: Employee  Dependent

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Last First M.I.

Address: \_\_\_\_\_  
Street Address Apartment/Unit #  
City State ZIP Code

Work Phone: ( ) \_\_\_\_\_ Home Phone: ( ) \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Name of School Nutrition Employee: \_\_\_\_\_

Present Position held in School Nutrition: \_\_\_\_\_

Employment Date: \_\_\_\_\_

Brief Job Description: \_\_\_\_\_

Involvement in Local Chapter, TSNA or SNA: \_\_\_\_\_

Are you a TSNA member? YES  NO  Total Number of Years in School Nutrition? \_\_\_\_\_

Are you a School Nutrition Association member? YES  NO  SNA Membership Number: \_\_\_\_\_

Where do you plan to enroll for further training? \_\_\_\_\_

What type of courses do you plan to take? \_\_\_\_\_

How will this scholarship affect your professional growth? \_\_\_\_\_

List three (3) goals or objective for this work/career: 1) \_\_\_\_\_

2) \_\_\_\_\_

3) \_\_\_\_\_

Education and Achievements

High School: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Degree: \_\_\_\_\_

College: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Degree: \_\_\_\_\_

Other: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Degree: \_\_\_\_\_

List achievements, honors, community service and school involvement: \_\_\_\_\_

\_\_\_\_\_

## References

Please list three professional references.

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_

## TSNA INDUSTRY SCHOLARSHIP CRITERIA

A \$1000.00 Industry Scholarship is available to any School Nutrition employee, child or grandchild of a current School Nutrition Employee, that is a current SNA member.

- Applicants who have applied for a scholarship in previous years are eligible to reapply.
- Scholarship recipients are eligible to reapply. The scholarship recipient must submit a transcript of their previous semester courses. The GPA must be at least a 2.5 or above.
- Scholarship funds must be used to attend a two or four-year college that is accredited.
- Preference may be given to applicants entering a Nutrition/Foodservice/Technology field.

## Disclaimer and Signature

*A \$1000.00 Industry Scholarship is available to any School Nutrition employee or employee's dependent. Requirements are that the employee holds membership in SNA and employment in School Nutrition.*

*I certify that my answers are true and complete to the best of my knowledge.*

*If this application leads to a scholarship, I understand that false or misleading information in my application or interview may result in repayment of funds to TSNA.*

*Scholarship funds will be paid directly to the institution upon receipt of proof of enrollment. Proof of enrollment documentation must be mailed to: TSNA, 4214 Hickory Ridge Road, Lebanon, TN 37087.*

*I agree to submit course documentation, and receipts, for tuition, books and other related expenses at completion of registration into higher education. In the event I am unable to use the \$1000 scholarship by January 10, 2011, I agree to surrender my scholarship award. If documentation of completed coursework is not submitted within a reasonable time after the end of semester, I agree to reimburse TSNA the amount of the scholarship award. Any refund by the institution of this scholarship money to the recipient must be returned to TSNA, 4214 Hickory Ridge Road, Lebanon, TN 37087.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## **Important Instructions:**

**The following MUST BE ATTACHED for application to be considered complete:**

- 1) Application Form
- 2) Write an essay (one page maximum) explaining your reason for applying for this scholarship.
- 3) Include one letter of reference from your school principal, School Nutrition Director, Director of Schools, or immediate supervisor.
- 4) If necessary, please use a separate sheet to answer any questions.
- 5) Application must be postmarked by **April 15, 2011**. Mail to: TSNA – Industry Scholarship  
4214 Hickory Ridge Road  
Lebanon, TN 37087