1.		
Please complete t	the application completely.	
* 1. Please enter your information:		
Name:		

Company:			
Address:			
Address 2:			
City/Town:			
State:	select state	•	1
ZIP/Postal Code:			
ZIP/Postal Code: Country:			
-			

2. Is the candidate a current Washington State Academy member?

-) Yes
- 🔿 No

3. Your Academy membership number:



4. Please upload the candidate's CV here.

Choose File

Choose File

No file chosen

5. RYDY candidates must be 35 years or younger as of 5/1/2025.

Please enter your birth date.

Date

6. Please enter your education information.

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

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

Please enter any elected positions for each section and the dates served. *Be very clear about the dates (in years). For example: President (6/2022 - 5/2023)

1. Academy of Nutrition and Dietetics

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

3. District Dietetic Association

4. Other Professional Associations

4. Demonstrated Leadership (Organizations) - Appointed

Please enter any appointed positions for each section and the dates served. *Be very clear about the dates (in years). For example: President (6/2023 - 5/2024)

1. Academy of Nutrition and Dietetics

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

3. District Dietetic Association

4. Other Professional Associations

5. Other
1. Please add any other information that supports the nomination for RYDY.
2. Please upload the 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: