

Application for the Louise Sublette Award

DUE DATE: **December 1, 2009**

Who May Apply: Active SNA Certified members of CSNA & SNA who are employed in a child nutrition program as a Food Service Employee/Manager or Food Service Assistant

Form of Award: A plaque and SNA Annual Conference Registration, and if a Regional winner, travel, registration hotel, up to the CSNA allowable amount, towards expenses to the SNA Conference to receive award..

What to Submit: In a standard size (10" x 11 1/4") three-ring binder:

- Completed applications for both CSNA and SNA
- Goal and reason for choice of goal
- Plan to attain goal
- Description of project
- Documentation of activities and results

For more complete information and directions, visit WWW.SCHOOLNUTRITION.ORG

Deadline: December 1, to the CSNA Awards and Scholarship Committee Chair.

Background Info.: This award is presented to a person who has achieved outstanding accomplishments in one or more specified areas in a period of three years. The winner of this award will then apply for the regional and the SNA Louise Sublette Award. The specified area are:

- Qualifications:**
1. Shall be responsible to or be a Single Unit Food Service Manager.
 2. Shall be a certified member of CSNA and SNA.*
 3. Shall have achieved an outstanding accomplishment in one or more of the following area of greatness which shall provide a basis for program improvement in Single Units statewide:

- Increasing food acceptability
- Interpreting the needs of the school food service program
- Training personnel
- Securing adequate funding for the school food service program
- Promoting members professional growth
- Cooperating with allied associations to promote child nutrition and/or professional growth opportunities
- Teaching/promoting nutrition education
- Increasing student participation
- Increasing public awareness
- Involving students in decision making

* To be eligible for SNA Louise E. Sublette Single Unit Award of Greatness, candidate must be a member of SNA, Single Unit Section.

Applicant:	Recommended by:	Place (X) before each attachment:
_____ Name _____	_____	() Detailed description of activity or project showing beneficial results.
_____ Position _____	_____	() Letter(s) of recommendation.
_____ Address _____	_____	() Copy(ies) of candidate's published article(s).
_____ Phone _____	_____	() Pertinent newspaper clippings showing name of newspaper and date published.
_____ School _____	_____	() Posters used project () Photographs of project
_____ Chapter Name _____	_____	() Other: Describe _____

Briefly describe accomplishment for which award is requested and give reason why activity deserves special recognition:

For a copy of the Application Packet contact Rhonda DeVaux.

Send Completed Application to: **Rhonda DeVaux,**

611 N. Rose Dr., Apt. F101, Placentia, CA 92870 ● Phone 949-936-6525 ● Fax 949-936-6529