

Jeanne B Lee Outstanding Dietetic Internship Award

Name:

1.List the ADDA meetings you attended (dates) and the topics discussed (including Fall Banquet and Spring Workshop.

2.List any other professional meetings attended such as continuing education opportunities. Give dates/topics.

3.List any ADDA board meetings that you attended.

4.Did you present a poster at the Spring Workshop? yes ____ no ____; provide title and brief description

5.List any involvement or promised commitment that you have had with the ADDA golf tournament.

6.List Medical Examiner article title, date submitted and brief description

7.List dates, times, and hours spent volunteering at Georgia Food 4 Health.

8.List other special projects, volunteer opportunities, and award/recognition that you completed that were not noted or mentioned above. These should be beyond the requirements of your rotations. Include dates, location, hours spent, and organization.

*you may attach another page if more space is required.

Return application to <u>vblively@gmail.com</u> by 4/15/2024; winner to be announced prior to graduation