

**NATIONAL EXTENSION ASSOCIATION OF FAMILY & CONSUMER SCIENCES
NEW YORK AFFILIATE**

**Eat Smart New York Award
(For Individual Nutrition Program Educators or a Team)**

Purpose: This award recognizes an individual or team of Nutrition Program Educators who have demonstrated outstanding programming efforts and impact in the Eat Smart New York (FSNEP) program.

Eligibility:

1. An individual award nominee must be employed at least two years or part-time equivalent in her/his present position. The nominee must be an Extension employee as of Feb. 1 of the current year working with or supervised by a NEAFCS member.
2. For a team award each nominee must be employed at least two years or part-time equivalent in their present position and must be Extension employees as of Feb. 1 of the current year working with or supervised by a NEAFCS member.
3. The application form and supporting narrative are to be prepared by the sponsoring NEAFCS member.

Recognition: A Certificate of Recognition will be presented at an appropriate time and place as determined by the NEAFCS-NYA Awards & Recognition Committee.

Application:

1. Complete the form attached to this award information. One form must be completed for each member of a team.
2. Summary statement of 50 words or less, for use in the awards booklet.
3. Program outline limited to two (2) double-spaced typed pages.
 - a. Assigned target audience
 - b. Brief statement of program accomplishments. Cite specific examples: include how the program serves the needs and interests of families and/or individuals with whom the member or team works, methods used in carrying out the program, topics presented, and results. Include use of volunteer leadership and/or cooperation with other agencies and organizations.
4. Supporting evidence limited to three (3) pages; a news article, success story or teaching aid.
5. Send three (3) copies of the application to the Awards & Recognition Committee Vice President by the NYA deadline.

Judging Criteria: 100 Points Application must score 90 points to be considered for recognition.

1. Program serves identified community needs (20 points).
2. Education methods used and topics presented (40 points).
3. Evidence of positive results (40 points).

EAT SMART NEW YORK AWARD APPLICATION
NEAFCS-NYA APPLICATION FORM
For Individual Nutrition Program Educator or a Team (One Form for Each Person)
☐ Individual ☐ Team

Nominee: _____

Office Address: _____

Phone: _____ County: _____

NEAFCS-NYA District: _____

If selected as an NYA Winner, please specify exact wording of name for award certificate:

List national initiative(s) that apply to project/program: _____

Number of years (fte) employed in the Eat Smart New York Program: _____

List job responsibilities:

List nominee's professional improvement activities in the past two years:

Name of sponsoring NEAFCS member: _____

Present Position: _____ Phone: _____

Office Address: _____

NEAFCS-NYA District: _____ County: _____

Signature of NEAFCS member submitting nomination

Date

Signature of submitting member's Supervisor, Program Leader,
or Association Director

Date