



Feeding Bodies. Fueling Minds.™

# Legislative Action Conference Scholarship

## Guidelines for the Colorado School Nutrition LAC Scholarship

### Who can apply for the scholarship?

Colorado School Nutrition Association members in the membership categories of:

- Director/Supervisor/Specialist
- Major City Director/Supervisor/Specialist
- Has been a member of CSNA for a least 2 years

### What are the goals of the Scholarship Fund?

Empower Colorado SNA Director/Supervisor/Specialist members to grow in their advocacy efforts for child nutrition programs.

### How much money is awarded?

Based on previous years fundraising amounts, scholarships will be awarded for the 2025 LAC on behalf of CSNA..

Scholarships 2025 will cover - Registration, Hotel, and Airfare. The recipient will be responsible for their own transportation to/from DIA, meals not included in the conference, and incidentals.

### How does the scholarship work?

Applicants submit a request to the CSNA Exec Director. Notification of the award will be sent by email or by a phone call.

**Only applicants who submit all required items will be considered.** Please note, to access your "SNA Join Date", log into My SNA – Member Record – Order History – the date of your very first purchase will be your join date.

### How will the scholarships be awarded?

Applications will be reviewed by the Executive Committee taking into consideration the following criteria

- CSNA Involvement
- Current and future goals for CSNA involvement
- Essay regarding advocacy efforts in the future

### What is the scholarship application process?

Submit the completed scholarship application no later than **4pm MST on Nov 11, 2025** All scholarship applicants will be notified regarding whether or not they are receiving a scholarship no later than November 15, 2025

### Send Completed Application To:

Email: [jodi@colosna.com](mailto:jodi@colosna.com)

Questions: 720-301-4682

## CSNA LAC SCHOLARSHIP APPLICATION

All fields are required. Please note that any applications failing to complete all required fields will automatically be disqualified from consideration.

| Personal Information   |  |          |  |                      |  |
|------------------------|--|----------|--|----------------------|--|
| Name                   |  |          |  |                      |  |
| Address                |  |          |  |                      |  |
| City                   |  |          |  | SNA Member ID        |  |
| State                  |  | Zip code |  | Date Joined SNA      |  |
| Phone                  |  |          |  | Email                |  |
|                        |  |          |  |                      |  |
| Employment Information |  |          |  |                      |  |
| District Name          |  |          |  |                      |  |
| Current Position       |  |          |  | Length of Employment |  |

| Estimated Program Cost (Scholarship award set to cover below travel expenses) |    |                             |                                                                                                                                                                                                                                                                                                                                      |
|-------------------------------------------------------------------------------|----|-----------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Registration                                                                  | \$ | TBD                         | For complete details on LAC, visit <a href="http://www.schoolnutrition.org">www.schoolnutrition.org</a> and find LAC under the "Meetings and Events" tab.<br><b>Dates of Conference:</b> March 8-10, 2026<br><b>Location of Conference:</b> Washington, DC<br><b>Recommended Airports:</b> Reagan International, Dulles or Baltimore |
| Lodging                                                                       | \$ | 3 nights at conference rate |                                                                                                                                                                                                                                                                                                                                      |
| Airfare                                                                       | \$ | TBD                         |                                                                                                                                                                                                                                                                                                                                      |

**List your prior and/or current involvement with CSNA. Please be specific with conferences attended (list all names and years) and/or committee participation (names and years) \*5 points**

**Is this your first LAC?**

**Have you previously received the CSNA LAC Scholarship?**

**What are your future goals for involvement within the association \*5 points**

**Tell us how attending the Legislative Action Conference would help further your advocacy efforts for child nutrition in the future? (200 word count maximum) \*15 points**

**What voice (personal/district stories that support CSNA/SNA current positions) will you bring to our Colorado delegation throughout legislative visits during LAC 2026? \*10 points**

I certify that the information provided in this application is true and accurate to the best of my knowledge.

Signature/Name of Applicant Date: