

**Nutrition First**  
**SCHOLARSHIP APPLICATION to Attend Understanding Toddler Behavior Nutrition**  
**Conference**

Registration Fee: \$145

Scholarship Amount: \$145

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Applicant's Name: \_\_\_\_\_

Applicant's Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Email Address: \_\_\_\_\_

Which training date would you like to attend: April 22      April 24      April 25

Name of Applicants Organization/Program:  
\_\_\_\_\_

Program Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Due: March 15, 2019      Preference given to those working in childcare and early learning settings.

**Please write a short description of how this scholarship will help to promote better nutrition for young children:**

By signing below I affirm that I am eligible and that the information above is true and accurate.  
\_\_\_\_\_

**Signature**

**Date**

Please return by mail to Nutrition First, PO Box 425, Conway, WA 98238 or email application to [info@nutritionfirstwa.org](mailto:info@nutritionfirstwa.org)