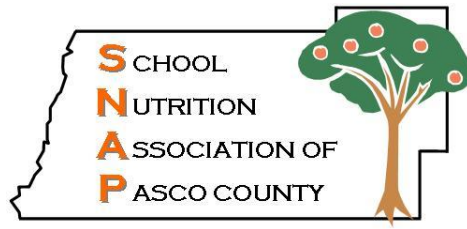


# School Nutrition Association of Pasco County Senior Year Scholarship Opportunity





7227 Land O' Lakes Blvd • Land O' Lakes, FL 34638  
(813)794-2183 • (352)524-2183 • (727)774-2183

## Scholarship Opportunity

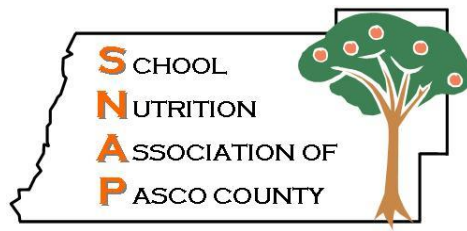
The School Nutrition Association of Pasco County (SNAP) will be awarding **one \$1,000.00 scholarship** to a qualifying senior in Pasco County Schools. The purpose of this scholarship is to help students further their education in a nutrition/food service related field. The scholarship will be awarded based upon the following items:

- SNAP application
- A 500 word essay on "Why you have chosen a career in nutrition or a food service related field and how this scholarship would impact your success."
- 1 letter of recommendation from a faculty member
- Academic transcript

Attached is the SNAP application that should be filled out and return **no later than March 31<sup>st</sup>, 2019**. All documents should be mailed to the following address:

**Food & Nutrition Services**  
**ATTN: Scholarship Application**  
**7227 Land O' Lakes Blvd**  
**Land O' Lakes, FL 34638**

If you have any questions regarding the application/process, please contact Amanda Musick at 813-794-2183 or by email [amusick@pasco.k12.fl.us](mailto:amusick@pasco.k12.fl.us) .



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## APPLICATION

Return this completed application along with the following:

**Application must be postmarked by:  
March 31, 2019**

- A copy of your transcript (with SAT or ACT score)
- A letter of recommendation from a high school faculty member
- A 500 word essay on "Why you have chosen a career in nutrition or food service related field & how this scholarship would impact your success."

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Name of High School: \_\_\_\_\_

Name of Advisor: \_\_\_\_\_ Contact Number: \_\_\_\_\_

G.P.A. at the end of Junior Year: \_\_\_\_\_ Class Ranking: \_\_\_\_\_ Class Size: \_\_\_\_\_

Intended College Major (*must be nutrition/food service related*): \_\_\_\_\_

Extra-curricular activities in high school: \_\_\_\_\_

Volunteer activities or work experience: \_\_\_\_\_

Honors/awards: \_\_\_\_\_

I certify that all information recorded above is correct and accurate: \_\_\_\_\_

*Signature of Student*

*Return application to the address listed above, ATTN: Food and Nutrition Services.*