

100% CERTIFICATION AWARD APPLICATION: SYSTEM WIDE

* Only complete this form if you meet the percentage guidelines.

Return to GSNA Headquarters by March 2nd

District Number _____

System with a high percentage of eligible school nutrition employees currently hold a certificate through SNA will be recognized at the annual GSNA Conference in April. In order to qualify, systems must meet the criteria below:

SYSTEM SIZE	PERCENTAGE
up to 100 employees	100%
101-200 employees	95%
201-300 employees	90%
301-400 employees	85%
over 400 employees	80%

Definition of eligible employees: One who works 4 or more hours per day, has a minimum of an eighth grade education (unless already employee holds a certificate), has worked in school nutrition at least one year, and is eligible to be paid from school nutrition funds. Return by **March 1st** to the **GSNA Headquarters Office**. **Each school must also submit an individual school application in order to receive recognition.**

Please indicate number of employees that will be attending the State Conference. Certified persons identified as attending conference will be given a certification ribbon to attach to their Conference name badge.

Name of System

Number of Schools in System

Address

City

State

Zip

Please print or type all information. If more space is needed, please use another sheet of paper. (A computer generated list may be attached to this sheet.)

FULL NAME OF SCHOOL	NUMBER OF "ELIGIBLE" EMPLOYEES	NUMBER OF CERTIFIED EMPLOYEES	NUMBER ATTENDING CONFERENCE
TOTALS:	_____	_____	_____

Form can be emailed to info@georgiaschoolnutrition.com or faxed to 770-934-8917.

(Forms MUST be SUBMITTED to GSNA and NOT placed in your scroll notebook.)

The above information is correct to the best of my knowledge.

School Nutrition Director

Date

Certification Awards

100% CERTIFICATION AWARD APPLICATION: INDIVIDUAL SCHOOL

District Number _____

Return to GSNA Headquarters by March 2nd

* Only complete this form if your school is 100 % Certified.

Schools in which **all eligible** SN employees are currently certified through SNA will be recognized at the GSNA Annual Conference. To receive this recognition, each school must complete this form and return by **March 1st** to the **GSNA Headquarters Office**.

Definition of eligible employee: One who works 4 or more hours per day, has a minimum of an eighth grade education (unless already certified), has worked in school nutrition at least one year, and is eligible to be paid from school nutrition funds.

Please indicate by an X if the employee will be attending the State Conference. Person(s) identified as attending conference will be given a 100% certification ribbon to attach to their Conference name badge.

Full name of School _____

System's name _____

Address _____

Number of employees _____

City _____ State _____ Zip _____

List **all eligible** employees in your kitchen and provide the information requested below. Please print or type all information. If more space is needed, please use another sheet of paper. (A computer generated list may be attached to this sheet.)

NAME	JOB TITLE	CERTIFICATION EXP. DATE	ATTENDING CONFERENCE

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The above information is true and correct to the best of my knowledge.

Signature of School Nutrition Director _____

Date _____