



Nutrition Abroad 4 Nutrition Students

(E-mail completed application to nutritionabroad@na4ns.com)

Application Information

Demographics

Name: _____ Date: _____

Preferred Name: _____ Preferred Pronouns: _____

Birthdate: _____ Age: _____ Ethnicity: _____

Gender at Birth: _____ Gender Identity: _____

Country of Birth: _____ Citizenship: _____

Religious Affiliation (if any): _____

Current Address: _____

Permanent Address: _____

Phone #: _____ E-mail Address: _____

Preferred method of contact: ☐ Phone Call ☐ Text Message ☐ E-mail

Emergency Contacts

Primary:

Name: _____ Relationship: _____

Phone #: _____ E-mail address: _____

Secondary:

Name: _____ Relationship: _____

Phone #: _____ E-mail address: _____

Primary contact should be provided with na4ns website address and encouraged to review all policies.

Health Insurance, Name of Provider: _____

Policy #: _____ Phone #: _____

Shirt or Lab Coat Size: _____ (i.e. small, medium, large)



Application Information

Educational Institution/Professional Recommendation

Highest Degree Obtained: _____

Name of Education Institution: _____

Address of College/University: _____

Department Director: _____

Phone #: _____ E-mail: _____

Name of Person for Professional Recommendation: _____

Phone #: _____ E-mail: _____

Name of Person for Professional Recommendation: _____

Phone #: _____ E-mail: _____

They will be e-mailed an evaluation form. Signature below includes permission to contact.

Program Selection 2026 (3-4 week rotations)

<i>Month / Dates 2026</i>	<i>Mark Desired Date(s) with an X</i>
<i>March 9 -27</i>	
<i>April 13 -May 1</i>	
<i>May 11 -29</i>	
<i>*May 25-June 19</i>	
<i>July 6-24</i>	
<i>September 7 – 25</i>	
<i>October 12 -30</i>	
<i>Specify Desired</i>	

Please check all date you are available.

Desired Nutrition Focus

_____ Renal

_____ Diabetes/Hypertension

_____ Mission component

_____ Other. Please specify: _____

_____ Community

_____ Research

Please select all rotations of interest to you.



Funding Application

We do our best to ensure every student who wants to attend our program can do so despite their financial situation. It's imperative we understand your current financial situation and needs. This application will help us figure out the best way we can help you achieve your study abroad goals. Please answer all questions honestly with the information you know now.

1. How much can you afford to pay or earn for this program? _____ Specify your currency.
2. What is your current college status?
 _____ Intern _____ Undergraduate Student _____ Graduate Student
3. Are you currently receiving any form of financial aid for your schooling?
4. Yes: _____ No: _____ If so, please provide some form of verification for the financial aid/support receiving.
5. What is the estimated cost for the following:
 - a. Airline Tickets: _____ b. Passport: _____
 - c. Vaccination: _____
 - d. Criminal Background Check: _____
 - e. Travel Medical Insurance
6. What type of resources do you have to pay for the cost of the program? Complete the form below.

<i>Funding Source</i>	<i>Expected \$ Amount</i>	<i>Date Funds Available</i>
<i>Personal Savings</i>		
<i>Family and \$ Gifts</i>		
<i>Scholarships</i>		
<i>Private Sponsor</i>		
<i>Federal Financial Aid (through your college/university or government)</i>		
<i>Private Student or Personal Loans</i>		
<i>Non-College Related Grants</i>		
<i>Credit Card</i>		
<i>Crowdfunding/Gofundme</i>		
<i>Job/work</i>		
<i>Fundraiser/Garage Sale/E-Bay etc.</i>		
<i>Other (s) (please specify):</i> _____		
<i>Total</i>		



How Did You Hear About This Program?

- ☐ Instagram ☐ All Access Dietetics ☐ E-Mail ☐ Professor/Director
☐ Individual ☐ Other: _____

Referral Program

If someone referred you to this program, please provide their name and email address.

Name: _____

Email: _____

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to acceptance, I understand that false or misleading information in my application and/or interview may result in my release.

Signature: _____ Date: _____

See below for further details about the registration process.



The Registration Process

(Students are able to discontinue the registration process at any time if they are no longer interested.)

Phase 1: Complete and turn in the following:

1. Program application
2. Funding application

Note: *The applications will be reviewed, and the funding for the program will be determined. Students may be contacted to discuss the applications if further clarification is needed.*

Phase 2: Turn in the following:

1. Education Transcripts
2. Proof of Identification: Passport, Driver's License, ID Card
3. Essay or Sponsor Letter (250-500 words)
 - Self-pay students and students with guaranteed payment methods will submit an essay detailing why they are interested in our program and what they hope to accomplish by attending.
 - Students who need a sponsor will write an essay for their sponsor on why this internship is important for them and the reason for their need for financial assistance. Students might also need to provide the following:
 - A photo of themselves
 - A letter from their institution of learning verifying their need for the internship and financial status.
 - Complete a waiver to share their photo and stories with a sponsor.
4. NA4NS Funding Agreement Letter (only signature and date needed)

Phase 3: Full Acceptance

1. Documents Needed
 - Background or criminal record check
 - Vaccination/Immunization Records (if necessary)
2. Acceptance Letter
 - Full payment is needed to guarantee spot.
 - Students will be placed on a waiting list until full payment is made.

Phase 4: Final Documentation and Training

1. Documents Needed
 - Program competencies
 - Health Questionnaire and Food Check List
3. Required Sessions and Training for International Travel
 - These sessions will be offered on zoom about one-two months prior to the travel date.



NA4NS business e-mails are secure, and all student information is kept in a secure location. Necessary information will only be shared with sponsors if students sign a waiver, otherwise, student information is never shared with others. Please request our privacy policy for further information.