

CURRICULUM VITAE

PERSONAL INFORMATION

Name Last Fondrick	First Katie	Middle Initial	
Work Address 855 E Lavaca	City Beaumont	State Texas	ZIP 77710
Work Phone	Work Email Address Kfondrick1@lit.edu		

EDUCATION *(List Highest Degree First)*

Institution	Major	Degree	Year
Lamar University	Family and Consumer Science	MS	2012
Lamar University	Dietetics	BS	2011

CERTIFICATION AND LICENSURE

Certified / Licensed Dietitian	
Certified Nutrition Support Clinician	

RELEVANT PROFESSIONAL EXPERIENCE *(List current primary position first.)*

Employer	Position	Department	Date
Christus Hospital	Certified Nutrition Support Clinician	ICU	2020-present

PROFESSIONAL MEMBERSHIPS/MAJOR COMMITTEES *(Last 5 years)*

Organization	Officer (if applicable)	Date

CONFERENCE PRESENTATIONS *(Last 5 years)*

Conference Name	Title of Presentation	Date
LIT Professional Development Day	Diet and Nutrition for Work Life Balance	April 2025

COMMUNITY SERVICE *(Last 5 years)*

HONORS AND AWARDS

OTHER MAJOR PROFESSIONAL DEVELOPMENT *(Up to 5 activities)*

Title	Type of Activity	Date(s)