

APPLICATION FOR "LEAP LEADS"!		
PERSONAL INFORMATION		
Name:		
Date of birth:	Cell Phone:	Email:
Street Address:		
City:	State:	ZIP Code:
ACADEMIC INFORMATION		
Classification (Summer 2021): <input type="checkbox"/> Freshman <input type="checkbox"/> Sophomore <input type="checkbox"/> Junior <input type="checkbox"/> Senior <input type="checkbox"/> Graduate		
Major:		Cum GPA:
Minor:		Expected Graduation:
Sam ID:		
Career(s) Desired:		
BY SIGNING BELOW, I GRANT PERMISSION TO UNIVERSITY STAFF TO CONSULT WITH MY REFERENCES, PROFESSORS, AND OTHER UNIVERSITY OFFICIALS TO ASSESS MY QUALIFICATIONS AS A "LEAP LEADS" CANDIDATE.		
MY SIGNATURE ON THIS APPLICATION ATTESTS TO THE FACT THAT ALL INFORMATION INCLUDED IS TRUE.		
Applicant Signature:		Date:

Additional Requirements:

- 1) One-page copy of your resume. Please use the template offered on the website.
- 2) Please submit a paragraph (in MS Word) explaining your interest in this program and how it fits into your goals for your "college career".

Please submit your completed, signed application form and additional required documentation to Professor Mike Yawn (see below). The deadline is August 9, 2021.

LEAP LEADS! Program
You may submit in person (CHSS 490) or by email:
936.294-1456 / mike.yawn@shsu.edu