

Leadership Richland Application

Mission

Leadership Richland strives to enhance leadership and foster personal growth.

Name: _____ Student ID: _____

Email: _____

Phone (Home): _____ Phone (Mobile): _____

Mailing Address: _____

City: _____ Zip Code: _____

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Major: _____

Total Number of College Hours Completed: _____

Student Status: Full Time (12 or more hours) Part Time (11 hours or less)

Occupation: _____

Hobbies/Interest: _____

Please identify your key leadership experiences (up to 3):
Please Use Additional Sheets if necessary.

Personal Statement (motivation for Participation with Leadership Richland):
Please Use Additional Sheets if necessary.

If selected, please plan to attend the orientation and first workshop. Date, time and place will be communicated to you

Please submit to Student Programs and Resources Office, Room E040,
By 5:00 p.m. on Friday, September 14th, 2007.