

LEADERSHIP ENRICHMENT PROGRAM

*Motivating and Challenging Gifted, Talented and
Creative High Ability Learners for 35 Years*



DATES: JULY 8-21, 2012

Student _____

Last Name

First Name

(Nickname or Preferred Name)

Middle Initial

Student I.D. Number from previous years (if known) _____ T-shirt Size: _____

Mailing Address _____

City, State, Zip _____

Parent/Guardian _____ Parent Email _____

Home Phone _____ Work Phone _____ Cell _____ Student Email _____

Gender ☐ Male ☐ Female Birth date (mm/dd/yy) ____/____/____ In Sept. 2012 this student will be in grade _____

How many previous summers has the student attended? ☐ SEP _____ ☐ LEP _____

Check session student wishes to attend: ☐ Session I ☐ Session II ☐ Either Session

Best time to be reached for an interview _____

Code of Conduct

The Leadership Enrichment Program embraces and celebrates the differences among its participants, and it is expected that all will follow a code of conduct. LEP Participants are expected to:

- Remain in designated, supervised areas at all times.
- Respect themselves and others, and their property.
- Actively and positively participate in classes, options, and other activities.
- Avoid behaviors which infringe upon the rights of other participants to learn and grow.

☐ I agree to follow the Code of Conduct. _____

Participant's Signature

Date

☐ I support the LEP Code of Conduct. _____

Parent's Signature

Date

The \$100 registration fee will apply toward tuition if accepted or be refunded if not accepted. Program cost is \$1,695. Due to a limited number of positions available for LEP, applications will be evaluated for the quality of responses and indication of leadership ability. Submit all materials to University of Northern Colorado, Summer Enrichment Program, Campus Box 141, Greeley, CO 80639 (postmarked by March 5, 2012). Late materials will not be considered. For additional questions, please call 970-351-2683.

LEADERSHIP ENRICHMENT PROGRAM LETTER OF RECOMMENDATION

Please distribute these questions to those recommending you. Two completed recommendations should be returned with the application.

Parent Permission to Release Information _____

Student Name _____

Completed by _____ Title _____

School/District _____

Street Address _____

City, State, Zip _____

Work Phone _____ Home Phone _____

E-mail Address _____

1. Describe your relationship with the applicant.
2. Describe his/her leadership skills and abilities.
3. Give examples of potential and/or performance in applicant's areas of interest.
4. What would the applicant be able to give to the program?

LEADERSHIP PERSONAL STATEMENTS

On your own paper, please answer the following questions and attach the sheets to the primary application.

1. Why do you want to attend LEP and what do you want to learn from the program?
2. Describe your leadership skills and abilities.
3. Give examples of your experiences as a leader.
4. If you could learn from any leader, past or present, whom would you choose, and what would you want to learn from this person?
5. Describe several of your interest areas that you could use to support and enhance:
 - 1) a SEP teacher's class
 - 2) a Super Saturday class
6. You will be asked to work with counselors in planning and leading after-class activity options. Describe three new activities you could plan for the students.
7. What other information do you want us to know about you?