



# LEADS Application Form

## SUBMIT TO YOUR STATE FEDERATION

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone (    ) \_\_\_\_\_ E-mail \_\_\_\_\_

Club \_\_\_\_\_ District \_\_\_\_\_

### ABOVE INFORMATION SHOULD BE CONCEALED DURING JUDGING PROCESS

List all local club offices and/or chairmanships held\* \_\_\_\_\_

\_\_\_\_\_

List all district offices and/or chairmanships held\* \_\_\_\_\_

\_\_\_\_\_

List GFWC club/district programs/projects in which involved\* \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

List positions at district/state/national level in which you are interested\* \_\_\_\_\_

\_\_\_\_\_

### ARE YOU WILLING TO:

- defray costs to attend GFWC LEADS not covered by GFWC or state?    Yes \_\_\_\_    No \_\_\_\_
- return to the state and share what you have learned at LEADS?    Yes \_\_\_\_    No \_\_\_\_

**DEADLINE FOR SUBMISSION** (date determined by state federation):

\* If more space is needed, please complete answers on reverse side of this form.

**RETURN THIS FORM, ALONG WITH TWO LETTERS OF SUPPORT FROM ACTIVE GFWC CLUB MEMBERS, TO:**

Your designated state federation LEADS selection representative

>> GFWC LEADS application adapted from a form developed by Lee Humphrey, GFWC Kansas

Find this form online at [www.GFWC.org/Forms](http://www.GFWC.org/Forms)

