

Check one: Fall ___ Spring ___ 20___

The **G**reatness **R**esults **A**fter **C**hoosing **E**xcellence (**GRACE**) Leadership Program Application:

Print Full Name:

EMPL ID #:

Signature:

Email:

Date:

Telephone:

Contact Number:

Expected Graduation Date:

We want to hear your story and get to know why you are interested in the GRACE Program.

Please write neatly and be sure to include:

- Why you would like to be a part of the program
- What are your expectations of this program
- What other commitments you have for this semester
- Your major