

[LEAD Scholars | Extra Leadership Learning Opportunity]

TO BE SCANNED/EMAILED TO KIMBERLY.MCCONNELL@SAINTLEO.EDU OR DROPPED OFF AT THE RESIDENCE LIFE OFFICE M-F 8AM-5PM BY THE END OF EACH MONTH

PRINTED FULL NAME _____ DATE OF EVENT _____

TITLE OF EVENT _____

HOW DID THIS EVENT COMPLEMENT OR DEVELOP YOUR LEADERSHIP SKILLS? (50 WORDS OR LESS) _____

PRINTED NAME OF SPEAKER/SPONSOR OF PROGRAM

SIGNATURE OF SPEAKER/SPONSOR OF PROGRAM