



LEND Fellowship Application
LEND Program
Shriver Center/UMass Medical School

Shriver Center/University of Massachusetts Medical School

Leadership Education in Neurodevelopmental and Related Disabilities (LEND) Program

200 Trapelo Road, Waltham, MA 02452-6368

LEND Fellowship Application Form

Please submit your application, up-to-date curriculum vitae, official college and graduate school transcripts and other required materials (see list on last page) as soon as possible so that we may begin the review process. Please type or print your responses. If you have any questions, contact the LEND Program at 781-642-0045.

Personal Information

First Name	Middle Initial	Last Name	
Date of Birth: (optional)	Gender:	Male	Female

Please indicate your ethnic background (this information is used for statistical purposes only):
(optional)

Present Address:

Street	City	State	Zip Code
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Permanent address if different:

Street	City	State	Zip Code
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Phone Number:	Home:	Work:
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Please indicate the best number at which to reach you: Home Work

E-mail Address 1:

E-mail Address 2:



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Emergency Contact Person:

Name

Address

Phone number

How did you learn about the LEND program?



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Educational Information

College/University Attended	Degree(s)	Major	Date of Degree
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Other Training, Special Courses (indicate dates):

Honors/Prizes Received:



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Work Information

Work History (list most recent first):

Organization	Location	Position	Dates
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Volunteer Work Relevant to this LEND Fellowship:

Organization	Location	Position	Dates
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Other Volunteer Work:

Organization	Location	Position	Dates
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On a separate sheet of paper, please write (type) a **Personal Statement** of your professional and personal philosophy, short- and long- term goals, and, how involvement in the LEND Fellowship Program and if applicable, the Master in Public Administration Program at Suffolk University will help you achieve these goals. Make particular reference to your personal experience or work with children, families and persons with disabilities. Include special areas of interest. Please describe how you have demonstrated leadership in the past (either personally or professionally). Give examples of your leadership potential.

Please check one of the following:

- Yes, I plan to apply for the Master in Public Administration degree at Suffolk University.
- I need more information about the Master in Public Administration program before I can make a decision.
- No, I am not interested in obtaining a Master in Public Administration degree

I certify that the information in this application is correct and accurate.

Signature:

Date:

Checklist: Is your application complete?

- Completed LEND Fellowship Application Form (5 pages)**
- Personal Statement**
- Your signature and appropriate waiver box checked on page 1 of the Professional Reference Form**
- Two Professional Reference Forms should be completed and mailed by two professional references**
- Curriculum Vitae**
- College and graduate school transcripts**
- Suffolk University Application Form** (for applicants interested in obtaining the Master of Public Administration degree; the Suffolk University Application Form is located at the end of the Suffolk University Graduate Prospectus)

Mail to: LEND Fellowship Program
Attn: Carol Imposimato
E.K. Shriver Center
200 Trapelo Road
Waltham, MA 02452