



NOTE: This form can be filled in, saved, and printed out on your computer if you have Adobe Reader 8+. You can also sign it digitally and submit it via email.

INLAND EMPIRE FUTURE LEADERS PROGRAM

2017 Student Application Form

(Please mail the application packet in one envelope.)

If you have previously attended an Inland Empire Future Leaders conference, you are not eligible to participate this year.

(Note: You can download a PDF Form version of this page from our website: www.iefll.org. Save it, fill it out, and print it using your computer.)

PART 1: PERSONAL DATA (Please type or print)

Name:		Birthdate:		Age:	Genf gt:
Home Address:				Home Phone:	
City:		State:		ZIP:	
Student E-mail:			Are you a fluent Spanish speaker? <input type="checkbox"/> YES <input type="checkbox"/> NO		
Parent Name:		Parent E-mail:		Parent Cell:	
Emergency Contact Name:		Relationship to Student:		Emergency Phone:	
School Name:		Grade:		Approx. GPA:	
State Senator:		State Assembly Member:		U.S. Congressional Representative:	
Approximate Family Income: <input type="checkbox"/> Under \$24,000 <input type="checkbox"/> Between \$24,000 & \$47,000 <input type="checkbox"/> Above \$47,000					

PART 2: ACTIVITIES

Tell us about class offices, clubs, organizations, organized sports, or hobbies in which you have been active. You may also include work experience and activities outside of school.

ACTIVITIES IN SCHOOL	YEARS INVOLVED	GRADE LEVEL(S)
ACTIVITIES OUTSIDE OF SCHOOL	YEARS INVOLVED	GRADE LEVEL(S)

How did you learn of the Inland Empire Future Leaders Program?	Who encouraged you to apply?	T-Shirt Size:
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PARENT/GUARDIAN CONSENT: My signature below indicates my consent for my daughter/son to apply for the IEFLP Conference. I affirm that the information provided by me/us in this application is correct, and I consent to its release to IEFLP.

Student Signature:	Parent/Guardian Signature:
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