

# NIU Leadership Academy

## Application Form

### Student Information

Name: \_\_\_\_\_ Date: \_\_\_\_\_

E-mail: \_\_\_\_\_ Z-ID: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

\_\_\_\_\_

Please mark your current school standing:

Freshman      Sophomore      Junior      Senior      Student at Large

Graduate

What is your intended major(s)? \_\_\_\_\_

### Questionnaire

What leadership and/or volunteer activities have you been involved in?

What would you like to gain from being a part of this program?

Describe yourself in three words:

In your own words, briefly describe what makes a good leader?

Note: Please return or email this completed form to:

Campus Life Building Suite 150  
kneal@niu.edu