

# Wisconsin Leadership Education in Neurodevelopmental and Related Disabilities (WI LEND) Program

## Application Form

Waisman Center, University Center for Excellence in Developmental Disabilities  
(Page 1 of 5)

Check if Milwaukee Link applicant

**You can fill out this form electronically and save as a .pdf file on your computer. Make sure to save your work!**

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

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

**Local Address**

**Home/Permanent Address**

Street Address: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_

City: \_\_\_\_\_

State/Province: \_\_\_\_\_

State/Province: \_\_\_\_\_

Zip/Postal Code: \_\_\_\_\_

Zip/Postal Code: \_\_\_\_\_

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

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

Cell Phone: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Email Address: \_\_\_\_\_

**I am applying for one of the following LEND Disciplines:**

**Advocacy and Leadership for an Individual, or a Family Member of an Individual, with a Developmental Disability:**

- Self-Advocacy (Person with a developmental disability)
- Family (Family member of a person with a developmental disability)

**Professional Practice and Leadership for Students and Professionals:**

- Audiology
- Genetics/Genetic Counseling
- Health Administration
- Human Development and Family Studies
- Medicine/Pediatrics
- Nursing
- Nutrition
- Occupational Therapy
- Physical Therapy
- Psychology
- Public Health
- Social Work
- Special Education
- Speech/Language Pathology

Are you a U.S. Citizen or do you have a Permanent Resident Visa?  Yes  No

**OPTIONAL**

- Minority:  Yes  No  Prefer not to say
- Disability:  Yes  No  Prefer not to say

**Please fill in the section below if you are a degree-seeking student:**

UW Student ID: \_\_\_\_\_

Class/Year Anticipated in Fall 2013: \_\_\_\_\_

Graduate Degree Program Status:

- Part-Time Student
- Full-Time Student

Graduate Degree Program Level:

- Doctoral level graduate student
- Masters level graduate student
- Post-doctoral level graduate student
- Post-masters level graduate student

**A Background Information Disclosure and Caregiver Background Check will be required** for trainees accepted into the LEND program.

Does your academic department have a recent Background Information Disclosure Form on file for you?  Yes  No

Does your academic department have a recent Caregiver Background Check on file for you?  Yes  No

# Wisconsin Leadership Education in Neurodevelopmental and Related Disabilities (WI LEND) Program

## Application Form

Waisman Center, University Center for Excellence in Developmental Disabilities

(Page 2 of 5)

**Past Experiences working with children with special health care needs/neurodevelopmental and related disabilities and their families.**

**List course work/workshops/seminars/trainings in health, disabilities:**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_
7. \_\_\_\_\_

**Volunteer or work experiences related to children with special health care needs/neurodevelopmental and related disabilities and their families.**

Estimate number of total hours:

Please describe the experiences:

# Wisconsin Leadership Education in Neurodevelopmental and Related Disabilities (WI LEND) Program

## Application Form

Waisman Center, University Center for Excellence in Developmental Disabilities

(Page 3 of 5)

**Drawing on your past and current experiences, please answer the following questions:**

1. What does leadership mean to you, and what qualities do you think speak to your leadership potential?

2. What do you hope to gain from participating in an interdisciplinary program focused on leadership development related to serving children with disabilities and their families?

# **Wisconsin Leadership Education in Neurodevelopmental and Related Disabilities (WI LEND) Program**

## **Application Form**

Waisman Center, University Center for Excellence in Developmental Disabilities

(Page 4 of 5)

3. Related to leadership in and beyond your professional role, what is your vision for yourself, looking five years into the future?

# Wisconsin Leadership Education in Neurodevelopmental and Related Disabilities (WI LEND) Program

## Application Form

Waisman Center, University Center for Excellence in Developmental Disabilities

(Page 5 of 5)

Wisconsin Leadership Education in Neurodevelopmental & Related Disabilities (WI LEND) Commitment to Participate in Follow-up and Evaluation Processes:

WI LEND is a special training program funded by the federal Maternal & Child Health Bureau of the Department of Health & Human Services (MCHB/DHHS) to prepare trainees who are parents of children with developmental disabilities, self-advocates, or students/graduates from the disciplines of audiology, genetic counseling, health administration, nursing, nutrition, occupational therapy, pediatrics/medicine, physical therapy, psychology, public health, social work, special education and speech/language pathology for leadership and advanced professional practice in order to improve the lives of children with neurodevelopmental and related disabilities and their families.

The measure of the WI LEND Program is based on the work done by the program graduates. Therefore participants are asked to complete trainee surveys after completion of the program. The professional development of each individual will be tracked for over 10 years to note leadership activities and accomplishments.

My signature (type your name in the Student/Applicant Signature box) verifies that if I enter the Wisconsin LEND Program, I am willing to participate in the evaluation and follow-up process, including completing the program follow-up forms sent to me after I have finished the program.

**Student/Applicant Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

### Application Checklist

Please be sure to submit all of the following:

- ✓ Official academic transcripts (if currently or previously enrolled as a college student; include undergraduate and graduate transcripts)
- ✓ A curriculum vitae or resume
- ✓ A recommendation form from a faculty member or someone familiar with your work or leadership development
- ✓ This completed application

**Make sure to save this form now!** It can be sent as an email attachment, or printed and included with other mailed paperwork.

If you wish to email your completed application and curriculum vitae or resume, please email to Julie Schears at [schears@waisman.wisc.edu](mailto:schears@waisman.wisc.edu)

All transcripts, letters of recommendation, and other paperwork can be mailed to:

**WI LEND Program  
c/o Julie Schears  
Waisman Center  
University of Wisconsin-Madison  
1500 Highland Avenue, RM S101F  
Madison, WI 53705-2280**