

Leadership Education for Association Professionals (LEAP)
2024-2025 Participant Application
Due: November 15th

Thank you for your interest in the FASFAA LEAP Program. Please read the program information accompanying this application and review it with your supervisor. To apply, complete the application and email it, along with your resume and question responses to: Andrew Hidalgo (hidalgo.andrew@spcollege.edu) and Chelsea Echols (echols.chelsea@spcollege.edu)

Name: _____ Institution: _____
Email: _____ Title: _____

Briefly respond to the following questions in a separate document:

1. Describe your experience as a Financial Aid Administrator, and what are your career goals?
2. What do you expect to gain from your participation in the LEAP Program?

Participant Requirements

- Current, paid member of FASFAA
- Financial Aid Administrator for less than 5 years
- Career plans to stay in the financial aid industry
- Supervisor approval to participate in LEAP
- Attend the FASFAA Annual Conference

Participant Expectations

- Prepare for monthly LEAP sessions by completing required readings and activities.
- Meet with their LEAP mentor each month prior to the LEAP session.
- Attend and actively engage in each LEAP session.
- Volunteer at the 2025 FASFAA conference (registration desk, session moderator, etc.)
- Serve on a FASFAA committee in the 2025-2026 membership year.

Supervisor Approval

I approve the above applicant to participate in the FASFAA LEAP program. I acknowledge that they will be required to participate in program activities during work hours and must attend the 2025 FASFAA Conference.

Supervisor Name: _____ Title: _____
Signature: _____ Date: _____

Participant Acknowledgement

I acknowledge the above requirements and expectations for the FASFAA LEAP Program. I agree to fully participate in all LEAP program activities and attend the 2025 FASFAA Conference.

Signature: _____ Date: _____