



The Connecticut Association
for Health, Physical Education,
Recreation and Dance

AAHPERD National Student Leadership Conference - October 11-14, 2007

Memorandum of Required Facts - Application Due Date: June 1, 2007

Student's Full Name: Ms. Mrs. Mr. _____

Student's Address: _____
Street City Zip

Telephone: _____ Email: _____

CTAHPERD Membership # _____ AAHPERD Membership # _____

Name of College/University currently attending:

Grade Point Average: _____ Date accepted as a major in HPERD Program? _____

College/University Activities: _____

Positions held, work experiences, student affiliations etc. that demonstrate your leadership ability.

Signature of Applicant

Date

Please mail to by June 1 to:

Connie Kapral
CAHPERD Executive Director
563 Miller Road
South Windsor, CT 06074

Questions? 860.644.9206 or ckapral@ctahperd.org

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| <p>Remember to send:</p> <ol style="list-style-type: none"> 1. 350 word statement 2. Grade transcript 3. 2 letters of recommendation |
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