



Leadership Academy Application

The University of Oklahoma Outreach
Center for Early Childhood Professional Development
1801 North Moore Avenue • Moore, OK 73160-3668
Local (405) 799-6383 • Toll Free 1-888-446-7608 • Fax: (405) 799-7634
• www.cecpd.org • pdas@ou.edu •

Please print clearly. ***NOTE - You may only complete one Leadership Academy.**

★ SECTION I ★

Name: _____
Full Legal Name (as it appears on your Social Security Card)

Mailing Address: _____
Street / PO Box

_____ City State Zip

Name of Center: _____

E-mail Address: _____

Business Phone: (____) _____ Home Phone: (____) _____

K8# _____ Licensed Capacity _____ Number of Subsidy Children Enrolled _____

Star Level: One Star Two Star Three Star Four Star Five Star

I am applying for the **Directors Leadership Academy:**

Oklahoma Director's Credential: _____
Award Date Expiration Date

I am applying for the **Family Child Care Home Leadership Academy:**

Professional Development Ladder: _____
Level Expiration Date

★ SECTION II ★

Please answer the following questions with a minimum of 100 words total. Clearly write your response in the space provided. If necessary, you may attach an additional paper.

1. Why do you want to be a part of the Leadership Academy? _____

2. What are your expectations of the Leadership Academy? _____

3. How do you plan to implement knowledge gained upon your successful completion of the Leadership Academy?

★ SECTION III ★

Applicant's Signature: _____ Date: _____

I have read the information regarding the Leadership Academy and understand that I must attend all scheduled sessions. I am committed to the success of this project and will contribute to my best ability if I am selected to participate.

Return application to: The University of Oklahoma Outreach
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