

Criteria for Application

Applicants will be selected based on the following criteria; reference letters, answers to narratives, extracurricular activities and academic transcript. In addition, only the information that is provided will be used to review and score your application.

> Please complete the entire form below, attaching a copy of your current curriculum vitae and **Academic Transcript and fax or mail to:**

ATTN: SNMMI-TS Student Application Leadership Academy Nikki Wenzel-Lamb 1850 Samuel Morse Drive Reston, VA 20190 Email: nwenzel-lamb@snmmi.org

Fax: 703-708-9020

All applications must be received by 5:00pm (ET) October 25. www.snmmi.org/studentapp for more information.

Leadership Acaden ☐ Must be a memb	ny: er of the SNMMI-TS	wing requirements to app a Nuclear Medicine Tecl	oly to the SNMMI-TS Studer
sonal Information			
SNMMI Member ID	Number		
Name			
Address (Last)		(First)	(MI)
City		State	Zip Code
Home/Cell Phone		Personal Email	
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School/Program No	ame		
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		State	Zip Code
School/Program Ac	ddress	State	Zip Code
School/Program Ac	ddress	State	Zip Code
School/Program Ac City School/Program En	ddress	State	Zip Code Degree Received
School/Program Ac City School/Program En	nail	State	

Activities that you participated in during High School and beyond. (Please attach additional sheets if needed.)

Position Held

Name of Organization

Years of Service

Position Held	Name of Organization	Years of Service

References

Please list three references. One your current Program Director, one from a current or former Professional Mentor (guidance counselor, Program Coordinator, etc.) and one from a Peer (fellow student, friend, etc.).

Full Name	Email	Phone Number
(Program Director)		
(Professional Mentor)	-	
(Peer)	_	-

Letter of Recommendation

Please provide official letters of recommendation, from each of the references you listed above. The letters should include their support of your application into the SNMMI-TS Student Leadership Academy and why they believe you are an excellent candidate for consideration.

Reference letters can be sent directly to Nikki Wenzel-Lamb at nwenzel-lamb@snmmi.org or they can be sent with the completed application.

Leadership Academy Interest Statements

Please provide a brief narrative, for each question below explaining how you will benefit from attending the SNMMI-TS Student Leadership Academy.

Please provide a brief narrative for each question in 200 words or less per question.

- 1. Select one challenge/issue from a past leadership position and the steps you took to solve it.
- 2. For you to consider the SNMMI-TS Student Leadership Academy weekend a success; what would you want to learn or better understand about your leadership skills (strengths or weaknesses)?
- What are your future professional goals and how do you think the Leadership Academy will help move you forward in pursuit of obtaining these goals.

Certification of Application

The information contained in this application form, the Interest Statements and the attached curriculum vitae is accurate to the best of my knowledge. If I am chosen to attend the SNMMI-TS Student Leadership Academy, I will be able to attend and successfully complete the Academy.

(Signature)	(Date)