2019 LEAP ADVISORY COUNCIL DESCRIPTION AND APPLICATION
LEAD. EMERGE. ADVANCE. WITH PASSION.

The Lead. Emerge. Advance. with Passion. (LEAP) Advisory Council is a unique opportunity for emerging leaders within AFWA. LEAP was launched in 2015 by the AFWA National Board to ensure the voice of emerging leaders is heard and utilized in the organization.

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| Purpose: | Provide AFWA with valuable input from emerging leaders to ensure AFWA meets the needs of all members.* Advise AFWA Board on programs and services of interest to members 35 years of age and younger.
* Emphasize the importance of supporting AFWA and The Foundation with time, energy, connections and philanthropy.
* Contribute to AFWA’s marketing through a variety of channels.
* Convey the mission and vision of AFWA.
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| Council Members: | The LEAP Advisory Council will consist of up to 8 AFWA Members, age 35 or younger, each serving a 2 year term. * One member of the Council, elected by the other Council members, will serve as an Ex-Officio member of the AFWA National Board of Directors.
* All other council members are encouraged to serve on at least one National Committee *(Membership, Chapter Initiatives, Communications, Audit, Conference, Scholarship, Fundraising)*
* Current Council members may apply for a second two-year term as long as they are still 35 or younger at the start of their second term.
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| Programs: | The LEAP Advisory Council will participate in a variety of programs throughout the year to develop skills as part of the LEAP experience. * Leadership opportunities at the AFWA National Conference
* Monthly virtual LEAP Sessions
* Mentorship by AFWA Leaders
* Other programs created with members of the LEAP Council
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| Commitment: | LEAP Council Members will participate in * Monthly LEAP Council conference call meetings
* In-person meeting at the AFWA National Conference
* Project assignments (as needed) and follow up with chair/leadership
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| Application Process: | * Completed applications are due by June 12, 2019
* Applicants will be reviewed and if necessary interviewed by a selection committee.
* Incoming LEAP Council Members will serve a two-year term beginning July 1, 2019 and ending June 30, 2021
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| --- | --- |
| NAME: |  |
| PHONE: | Cell: Office: Home: |
| EMAIL: |  |
| ARE YOU ACTIVE ON: |  [ ] Facebook [ ] Instagram [ ] LinkedIn [ ]  Twitter |
| BIRTHDAY: mm/dd/yy |  |
| ETHNICITY please chose all that apply: | [ ] Asian [ ] Black/African American [ ] East Indian [ ] Hispanic[ ] Middle Eastern [ ] Native American [ ] Pacific Islander [ ] White/Caucasian[ ] Other:  |
| LOCATION (CITY/STATE): |  |

|  |  |
| --- | --- |
| COMPANY/EMPLOYER:  |  |
| TITLE: |  |
| TOTAL YEARS OF EXPERIENCE: |  |

|  |  |
| --- | --- |
| HIGHEST DEGREE EARNED:  |  |
| SCHOOL ATTENDED: |  |
| GRADUATION YEAR: |  |
| Do you have any certifications? If yes, please list:  |
| Have you ever received a scholarship from The Foundation of AFWA? [ ] Yes [ ] No |
| Do you have any further education or certification plans (w/in the next five years)? if yes, please describe: |

*Continue* >>

|  |  |
| --- | --- |
| AFWA CHAPTER (if applicable):  |  |
| YEARS AS AFWA MEMBER: |  |
| CHAPTER LEADERSHIP POSITIONS: |  |
| CURRENT LEADERSHIP ROLE(S) OUTSIDE OF AFWA: |  |
| RECENT AWARDS/RECOGNITIONS: |  |

AVAILABILITY AND SUPPORT:

* Will you attend the AFWA National Conference and in-person meeting in Orlando, Florida, Oct 21-23, 2019? [ ]  Yes [ ] Maybe [ ]  No
* Can you commit to a monthly LEAP virtual session? [ ]  Yes [ ] Maybe [ ]  No
* Does your employer encourage your participation in programs like LEAP? [ ] Yes [ ] No [ ] Don’t know/haven’t asked
* If selected, what is your specific area of interest as it relates to LEAP Council?

 [ ] Social Media [ ] Developing content for Young Professionals (newsletters, articles, etc.) [ ] Recruiting Young Professional Members to AFWA [ ] Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

REFERRAL:

* Were you referred to the AFWA LEAP Council by another AFWA member? [ ] Yes [ ]  No
* If yes, please provide name and contact information of the referral: Click here to enter text.
* You may include a letter of recommendation from AFWA member (optional)

In addition to this application, you may also include the following:

* Current resume (optional)
* Or, link to your LinkedIn profile:

SUBMISSION:

**The due date for the LEAP application is June 12, 2019**

**Submit to Deborah.williams@AFWA.org**