

# LEAP Form

## Local Evaluation Appeals Panel Member Nomination Form

### Information

Name: \_\_\_\_\_

School/Worksite  
Location: \_\_\_\_\_

Position Running:

- One-year term       Two-year term       Three-year term

Optional Resume: (Explain reason for running/background of experience)

**50 Word Limit**

*Email completed form to [Jennifer.lawson@jcta.org](mailto:Jennifer.lawson@jcta.org)*

***Nomination deadline is: Wednesday, October 7<sup>th</sup>, 2015 before 5:00pm***