

**MICHAEL F.
PETERSON**

**LEADERSHIP
CHALLENGE
JULY 8 - 12, 2024**



APPLICATION FORM

Name :

High School : Date Of Birth :
D D M M Y Y

Full Address :

Phone : Email :

Parent Information

Parent Names :

Full Address :

Phone : Email :

T-shirt size : ☐ Small ☐ Medium ☐ Large ☐ X-Large ☐ XX-Large

Are you able to commit to the full week Monday - Friday? : ☐ Yes ☐ No

Are you willing to participate in a talent show during the leadership challenge? : ☐ Yes, individually ☐ Yes, in a group

What talent will you share? :

Please provide a reference for an adult other than your parent. This could be a teacher, coach, neighbor, employer or religious leader.

Reference Name :

Reference Contact Information (phone or email) :

Please complete the essay on the following page.



THANK YOU

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2024**



Please choose ONE of the following questions to answer. You may write your answer here or attach it to this application.

Tell about a time you faced a problem or challenge and how you overcame it.

OR

Tell about a problem you see in your school or community and what actions you would suggest to solve it.

Return your completed
application to SESD

SESD
803 North 500 East
Payson, Utah 84651
801-465-8020

THANK YOU