

**Self-Advocate Applications are being accepted for the**

**2023-2024 West Virginia University LEND Training Program**

**What is LEND?**

**L**eadership **E**ducation in **N**eurodevelopmental **D**isabilities (**LEND**) programs prepare participants to be leaders in the field of disabilities. WVU LEND is a one-year training program that includes learning through experiences and core learning objectives.

*LEND provides* ***paid*** *opportunities for self-advocates to:*

* *Share their experiences with others*
* *Increase their knowledge*
* *Be a member of a team*
* *Help create more inclusive communities*

To learn more about WVU LEND and specific program requirements, visit <https://lend.cedwvu.org/>

**Could I be a self-advocate?**

A LEND self-advocate is any individual with disabilities who wants to learn to advocate for themselves and others. Past applicants have identified as having disabilities such as autism, intellectual or learning disabilities, cerebral palsy, genetic conditions, traumatic brain injuries, and/or physical disabilities. Applicants can be members of the community and/or students.

Fully remote participation may be possible for approved applicants.

**How to apply:**

1. Complete Attached Application
2. Submit two (2) completed Recommendation Forms from people who know you well. Consider requesting recommendations from past teachers, church leaders, therapists, or family members. The required Recommendation Forms are attached.
3. Mail, email, or fax completed application to:

LEND Program

West Virginia University

Center for Excellence in Disability

959 Hartman Run Rd.

Morgantown, WV 26505

Email: LEND@hsc.wvu.edu

Fax number: (304) 293-7294

1. If selected to move forward, you will be contacted for an interview with the review committee. Full program requirements will be reviewed during this meeting.

**\*\* Completed applications due by March 17, 2023 \*\***

CENTER FOR EXCELLENCE IN DISABILITIES

959 Hartman Run Road Morgantown, WV 26505-8334

304.293.4692 304.293.7294

[www.cedwvu.org](http://www.cedwvu.org/)

Equal Opportunity/Affirmative Action Institution

**WVU LEND 2023-2024 Self-Advocate Application**

*Responses can be typed and submitted or this form can be printed and hand-written.*

*If you have questions or need assistance completing this application, please call (304) 293-4692 or email* [*LEND@hsc.wvu.edu*](mailto:LEND@hsc.wvu.edu)

**Applicant Name:**

**Date of Birth:**

**Address:**

**Home Phone:**

**Cell Phone:**

**Email:**

**Please mark the best way to contact you.**

Home Phone: Cell Phone Call: Cell Phone Text Message: Email:

**Are you a US citizen?** Yes No

**If you would like to provide information about your experience with your disability, please do so here:**

**How did you learn about the LEND Program?**

In your adult life, what is one of the biggest challenges you have experienced related to your disability? How have you handled it?

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**Please provide a short response to the following:**

Why are you applying for the WVU LEND Program? What do you hope to gain from your LEND experience?

In your adult life, what is one of the biggest challenges you have experienced related to your disability? How did you handle it?

**WVU LEND 2023-2024 Self-Advocate Recommendation Form**

*Responses can be typed and submitted or this form can be printed and hand-written.*

*If you have questions or need assistance completing this recommendation,*

*please call (304) 293-4692 or email* [*LEND@hsc.wvu.edu*](mailto:LEND@hsc.wvu.edu)

**This form is to be completed by reference and returned to applicant for submission.**

**Applicant Name:**

**Reference Name:**

Profession, Title, or Organization:

**How long have you known the applicant?**

**How do you know the applicant?**

**How well do you know the applicant?**

*Extremely Well Fairly Well Not Very Well*

**How does the applicant interact with others, including peers and in larger groups?**

**Describe the work ethic, motivation, and personal responsibility you have seen exhibited by the applicant.**

**Please share why you think this applicant would be successful in a self-advocacy or leadership role.**

**Reference Signature: Date:**

**WVU LEND 2023-2024 Self-Advocate Recommendation Form**

*Responses can be typed and submitted or this form can be printed and hand-written.*

*If you have questions or need assistance completing this recommendation,*

*please call (304) 293-4692 or email* [*LEND@hsc.wvu.edu*](mailto:LEND@hsc.wvu.edu)

**This form is to be completed by reference and returned to applicant for submission.**

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**Reference Name:**

Profession, Title, or Organization:

**How long have you known the applicant?**

**How do you know the applicant?**

**How well do you know the applicant?**

*Extremely Well Fairly Well Not Very Well*

**Describe how the applicant interacts with others, including peers and in larger groups?**

**Describe the work ethic, motivation, and personal responsibility you have seen exhibited by the applicant.**

**Please share why you think this applicant would be successful in a self-advocacy or leadership role.**

**Reference Signature: Date:**