

Credit for LSLA Presentation

After completing your Lone Star Leadership Academy presentation, please have the appropriate individual complete the section below. Completed form may be scanned and e-mailed, faxed or sent regular mail.

Student's Name _____

Lone Star Leadership Academy program attended _____

Year attended _____

____ Student gave verbal presentation

____ Student gave verbal presentation and used pictures

Short Classroom Presentations – minimum 4 classes

Teacher's name: _____ Number of classes: _____

School and grade(s) _____

Teacher's signature _____ Date _____

Teacher's e-mail address _____

Presentations for community clubs (i.e. Rotary, Lions, Kiwanis, Chamber of Commerce, etc.)

Service Club name: _____ Sponsor's name _____

Sponsor's signature _____ Date _____

Sponsor's e-mail address _____

Number of attendees _____

Presentation for faculty at in-service, etc. Also PTA or any other appropriate school group

School Administrator's name _____

School _____

School Administrator's signature _____ Date _____

School Administrator's e-mail address _____

Number of attendees _____

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