<u>Name:</u> <u>Address:</u> <u>Telephone and email:</u> <u>School and Education level:</u> Date:

Overall Objective:

What are your overall career objectives ? Why SLAP ? How much time per day/ week to study this program? Please detail your time here.

Think about your Plans:

next 1-2 month during SLAP academic program: (Such as what you want to learn, and how?)

in the next 1 yr:

in the next 5 yrs:

What are you doing to meet these objectives ?

Any other items / expectations ?