



VT LEND APPLICATION PROCEDURE

Before submitting an application, please contact:

Ivania Belen Ruiz Mangas Program Specialist 802-656-0204
Ivania-belen.ruiz-mangas@med.uvm.edu

To apply, you will need:

- ☐ Complete application form
- ☐ Two (2) letters of recommendation
 - ☐ One letter from a teacher or professor
 - ☐ One letter from a supervisor, a professional in the community, OR a family member of a person with a disability

Ask the person writing the letter to write about:

- Your experience or work with people who have disabilities
- Your leadership experience OR your skills to become a leader
- Your speaking skills
- Your writing skills

- ☐ A 1 or 2 page letter saying why you want to be in the VT LEND program

Write about

- Your leadership goals and work in leadership
- Any experience or work you have done about disabilities
- Your work with families who have children with disabilities
- Your work or learning about cultural diversity
- Your work or learning about working on a team
- Your work or learning about policy or advocacy
- Any research you have done

- ☐ Your resume

- ☐ Original transcript (Copy of your records) from your high school or college.

A copy is ok if you went to a college outside the United States or you are in a graduate program at UVM.

Mail or email all these papers to: Ivania Belen Ruiz Mangas
Ivania-belen.ruiz-mangas@med.uvm.edu

VT LEND Program, Attn: Ivania Belen Ruiz Mangas
University of Vermont
477 RE4, UHC
1 S. Prospect Street
Burlington, VT 05401

(See application on next two pages)

APPLICATION FORM

NAME:

DATE OF APPLICATION:

DISCIPLINE:

HOME ADDRESS:

PHONE: Home

Work

Cell

E-MAIL:

EDUCATION:

High School	Year
<input type="text"/>	

College/University	Major	Degree	Year
<input type="text"/>			
<input type="text"/>			
<input type="text"/>			

CURRENT JOB:

Please describe your work responsibilities:

CLINICAL/PROFESSIONAL EXPERIENCE or WORK IN DISABILITY:

REFERENCES:

1. Name: Phone:

2. Name: Phone: