

Multilingual Parent Leadership Program (MPLP) Application

Personal Data		loday's Date://
Name:		- -
Last name		First name
Home Address:		
•		E-mail:
·	Preferred language:	
	How old were you when you moved to the US?	
Number of children in public scho	ols: List your children's	s school(s):
Education: 🗖 High school 🗖 some	e college 🖵 completed coll	lege 🖵 graduate school Major/Degree:
Work experience:		
How did you find out about MPLP	?	
Parent Involvement		
Are you currently a member of yo		
Check all the school events/activit	-	• •
☐ PTA meetings ☐ Parent/Teacher Conference	5	
	'	. ,
That are challenges that prevent Language		ting in your child's schooling? Check all that apply. Differences in educational practices
Transportation	☐ Child care	
Time	☐ Others:	
lave you attended Howard Coun	ty Public School System's b	ooard meetings? 🗖 Yes 💢 No
eadership Skills		
Which skill set interests you the m	ost? Select two.	
Communication skills		☐ Ability to work with diverse population
People skills	5	☐ Ability to analyze situations/problems
Understanding of American cul		
ist all of your school and commun	ity committees.:	
What would you like to learn or ga	ain trom this leadership pro	gram'!
Required program dates.		
Session 1: February 13, 2024 Tuesda		Session 4: March 5, 2024 Tuesday 9:30 a.m. – 12:30 p.m
Session 2: February 20, 2024 Tuesda	-	Session 5: March 12, 2024 Tuesday 9:30 a.m. – 12:30 p.m
Session 3: February 27, 2024 Tuesda	у 9:30 a.m. – 12:30 p.m.	Session 6: March 19, 2024 Tuesday 9:30 a.m12:30 p.m

Please return Application by January 26, 2024 to the address below.

Multilingual Family Services