

SLG: Lessons on Leadership (LOL) Survey

Take time to reflect on your leadership experience. The information you provide will prove very valuable in the assessment and improvement of the SLG program. Thank you!

* Required

Email address *

Your email

What is the name of the organization you are affiliated with?

Your answer

What year did you join your organization?

Your answer

Number of semesters in your organization.

- 1 semester
- 2 semesters
- 3 semesters
- 4+ semesters

Position(s) within organization (check all that apply)