## 2024 P&L Leadership Accelerator Program Participant Enrollment Form

Please note: (1) This form is to enroll both the participant and internal sponsor. (2) \* indicates required fields.

## 1. Full Name\*

2. Phonetic spelling of your full name\*

3. Full job title\*

4. Company\*

- 5. Email address\*
- 6. Cell phone number\*

7. Office phone number\*

8. Mailing address\* (for program related purposes only)

9. Time in current title\*

Less than 5 years

5-10 years

Greater than 10 years

10. Please describe any P&L experience you may have\*

ourse schedule, syllabus and best practices?*	pant packet which includes the fu
YES NO	
3. Please list any anticipated schedule conflicts that fall within	he program duration*
14. Name of company contact*	
5. Email address of company contact*	
16. Name of internal sponsor*	
17. Email address of internal sponsor*	
18. Please send your professional bio to pandlprogram@paradi	gm4parity.com
Yes, I have sent my bio Not yet, I will send wit	hin the next business day
19. Please send your professional headshot to pandlprogram@p	aradigm4parity.com
Yes, I have sent my headshot Not yet, I will send wit	hin the next business day
20. P4P is committed to racial equity therefore 50% of the seats multicultural women, can you please share how you identify? *	in this program are reserved for
21. Additional Comments (optional)	

PP for