**Emerging Leaders Program (LEAP) Application**

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| How did you hear about LEAP? | | |
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| Previous years you have applied to LEAP, it any: | |  |
| Please choose one category that best describes what our organization does. | | |
| Is your employer a nonprofit organization? |  | |
| Please list your last 3 employers, starting with the most recent: | | |
| 1.  2.  3. | | |
| Describe your current company/organization. | | |
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| Describe your responsibilities at work. | | |
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| Please provide a brief professional biography (250 words or less). | | |
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| If you have completed any higher education, please list starting with the most recent. | | |
| 1.  2.  3.  … | | |
| Do you have any awards you would like to tell us about (ex. Scholarships, certifications, etc.)? Please list starting with the most recent. | | |
| 1.  2.  3.  … | | |
| Please list any community involvement or volunteering in the past five years, starting with the most recent. | | |
| 1.  2.  3.  … | | |
| Why is the LSM Emerging Leaders Program a good fit for you at this time? | | |
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| What leader do you most admire and why? | | |
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| What unique perspective or experience can you contribute to the class? | | |
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| What do you hope/expect to gain from this program? | | |
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| What do you consider to be your most important personal and professional accomplishment, and why? | | |
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| Please describe your leadership journey so far. | | |
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| Please upload a professional color photo of yourself (business attire preferred). |
| Please upload your professional resume. |
| Please upload your letter of recommendation. |
| A $125 Application Fee is required and non-refundable. Please confirm how you will be paying. |
| You are required to submit and Official Authorizing Statement from your employer indicating his/her support of your participation in the program. By checking this box, you confirm that you will request and official authorizing statement. This statement must be mailed or emailed to LSM by September 15. |
| I understand that graduates of Emerging Leaders are encouraged to maintain membership in the organization and to participate in Leadership Southern Maryland’s committees and programs. I understand that I am required to attend each session and meet the attendance requirements as outlined in the application information, and that missing more than 8 hours could result in dismissal from the program. I commit to take the knowledge that I’ve gained through this experience and to use it to strengthen our community. |