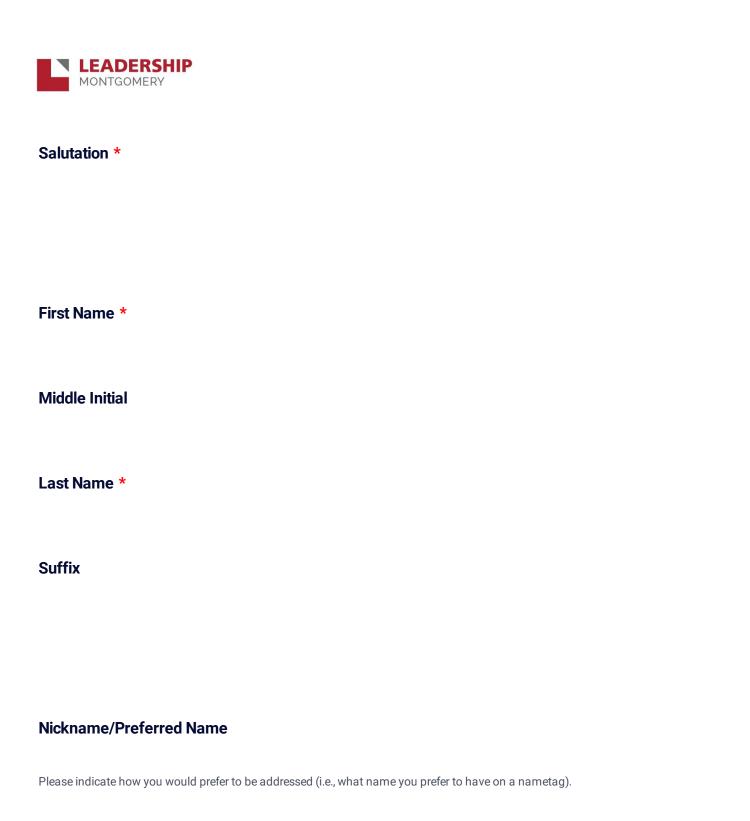
## **Emerging Leaders Program Application**

This application can be saved and continued later via the button at the bottom of the application. The application is broken into several sections for ease of navigation; be sure to complete all required questions in each section. The final step in the application process is the submission of an application fee of \$75 (\$25 for repeat applicants).



**Preferred Pronouns** 

Organization *		
Secondary Phone		
Area Code	Phone Number	
Job Title *		
What other LM programs  Business Leaders Impact  CORE  Encore  REAL Inclusion  Senior Leadership Montg  Other		
Mobile Phone *		
Area Code	Phone Number	
Administrative Assistant Email		
If you would like an administrative address here.	assistant to be copied on all Leadership Montgomery communications, please input that email	
What type of number is your secondary phone?		
Which is your preferred pl	none? *	
Primary Email *		

Additional Email *		
Please list a secondary email shou	ıld we be unable to reach you via your primary email.	
What is your primary/preferred address? *		
Street Address		
Street Address Line 2		
City	State / Province	
Postal / Zip Code		
Please indicate your prim	ary/preferred address type. *	
Secondary Address		
Street Address		
Street Address Line 2		
City	State / Province	
Postal / Zip Code		
Please indicate your secondary address type.		
Please specify		

How many years have you lived in Montgomery County? \*

### How did you hear about Leadership Montgomery? \*

### What is your gender identity? Check any that apply. \*

Female

Male

Non-binary or gender non-conforming

Transgender

Not listed here (identify below)

Prefer not to answer

Leadership Montgomery seeks to reflect the diversity of Montgomery County. We ask for demographic information from our applicants to ensure we are being inclusive and creating a sense of belonging in our program. We acknowledge that demographic categories can feel limiting, are a social construction, and do not encompass the wide range of people's identities. The following questions are optional and your response is anonymous.

#### Birth Date \*

Month Day Year

For most applicants, this is an employer. If you are retired, please indicate your last employer, position, or field with a "retired" as your job title.

### How do you identify racially and/or ethnically? Check all that apply. \*

American Indian, Native American, Indigenous, or Alaska Native Asian or South Asian Black or African American

Middle Eastern, North African, West Asian (MENA/WANA)  Native Hawaiian or other Pacific Islander
White
Biracial, mixed-race, or multiethnic  Not listed here (identify below)
Prefer not to answer
Organization Category *
Please select the category that best describes your organization
Organization Industry *
Please choose the category that best describes what your organization does.
How will you share you Employment History, Education, & Awards/Recognition *  Upload a PDF resume  Enter manually below
Employment History
List previous positions, beginning with the most recent first. Include active military duty, if applicable:
Employer
Employer
Title/Responsibility

Title/Responsibility

Employer
Title/Responsibility
Describe your current company/organization:
Describe your responsibilities at work:
If you upload your resume, please insert N/A to continue with application.
Education
Begin with the most recent, and include high school or equivalent, college(s), and any postgraduate studies.
School Name, City & State
Degree Awarded
School Name, City & State

Degree Awarded
School Name, City & State
Degree Awarded
Special Awards/ Honors
Presented By
Award/Honor
Year
Presented By
Year

Please list, in order of importance to you, the nonprofit, civic, professional, social, religious, athletic or other organizations in which you are or have been involved with. Note. This is an important part of the selection criteria.

# Organization \* Position Held \* Hours per month \* 0-5 5-10 10-15 15-20 20+ Organization **Position Held** Hours per month 0-5 5-10 10-15 15-20 20+ Organization Award/Honor **Position Held** Hours per month 0-5 5-10

10-15
15-20
20+
Organization
Position Held
Hours per month
0-5
5-10
10-15
15-20
20+
Give an example of how you used your leadership skills to effect positive change in one of these organizations. *
Why is Leadership Montgomery Emerging Leaders a good fit for you at this time in your life? *

What do you hope to contribute to the cohort of Emerging Leaders as a participant? *		
Please describe your leadership journey to-date. *		
TWO letters of recommendations must be submitted via PDF upload below. Letters of recommendation are an important part of the selection process and must cite specific attributes of the candidate. Letters of recommendation should be from 1) your current supervisor, indicating their full support of your participation, including recognition of the time commitment and the financial obligation of tuition; and 2) one non-related individual who can supplement the application with firsthand knowledge of your leadership, character, and/or community service. The second letter should include the nature and duration of the relationship between the writer and the candidate.		
Tuition for participants accepted to Leadership Montgomery's Emerging Leaders program is \$3,200, billable upon acceptance into the program. Participants whose participation is sponsored by an employer or other organization are required to contribute 10% of the tuition (\$320) as a demonstration of personal commitment.  Payment plans and tuition		
assistance are available upon request.		
If selected to participate in the Emerging Leaders Class of 2025, I agree to secure payment or payment plan contract for the entire nonrefundable tuition of \$3,200 by Monday, July 15th, 2024. I understand that I am required to attend each session and meet the attendance requirements as outlined in the program description, and that missing more than 16 hours could result in dismissal from the program.		
What do you hope or expect to gain by participating in Emerging Leaders? *		

### **Tuition Options (check all that apply)**

Bill 90% of tuition to sponsoring organization (specify below) and 10% to applicant Bill 100% of tuition to applicant Payment plan requested (LM will follow up with payment plan options) Tuition assistance requested (application below)

### **Sponsoring Organization**

### **Tuition Assistance Form**

Tuition assistance is considered separately from your application and has no influence or effect on the Selection Committee's evaluation of your application. Tuition assistance requests must be submitted at the time of application. All information will remain confidential. \*\*PLEASE NOTE\*\* You must download or print the form, then upload the completed form and supporting documents in PDF format using the upload functions below.

Leadership Montgomery requires certification by submitting an electronic signature. \*

Confirm Signature

### You may save and continue your application via the save button below.

All required fields (marked with a red asterisk\*) must be completed before the application can be submitted. This includes the two required letters of recommendation.