

**New Leader Program Application**

**NLP 2016-1 Program Schedule NLP 2016-2 Program Schedule**

***Nomination Deadline: February 16, 2016\****  ***Nomination Deadline: July 17, 2016\****

Session I Mar 14-18, 2016 Session I Aug 14-19, 2016

Session II Jun 6-10, 2016 Session II Nov 13-18, 2016

Session III Sep 19-23, 2016 Session III Jan 23-Feb 3, 2017

**\*Nomination deadlines may be closed earlier if program is filled**

**Please indicate the session in which you are applying:**

\_\_\_ **Session NLP 2016-1**  \_\_\_ **Session NLP 2016-2**

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| **PART A: Applicant Information** |
| Name |  |
| Position Series, Grade and Title |  |
| Email Address |  |
| Home Address |  |
| Work Address |  |
| Work Phone |  |
| Work Fax |  |
| Home Phone |  |
| Educational Level |  |
| Social Security Number |  |
| Total Government Employment (years) |  |
| Total Other Employment (years) |  |
| Former participant of other Graduate School Leadership Programs? | Check all that apply: YES No  Aspiring Leader Program |

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| **PART B: Applicant’s Immediate Supervisor** |
| Name |  |
| Position Series, Grade and Title |  |
| Email Address |  |
| Work Address |  |
| Work Phone |  |

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| **PART C: Program Coordinator** |
| Name |  |
| Position Series, Grade and Title |  |
| Email Address |  |
| Work Address |  |
| Work Phone |  |

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| **PART D: Purpose for Applying**To Be Completed by the Applicant: Please state your purpose for applying and how your participation in the **New Leader Program** will support your career goals. |
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| **PART E: Evaluation of Performance**To Be Completed by the Applicant’s Supervisor: Please summarize the applicant's current performance. |
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| **PART F: Payment Method Information** |
| **Tuition**  **$3,329** (tuition does not include travel, meals or lodging)We must receive payment or payment information with this application to process the registration. Select one:

|  |  |
| --- | --- |
|  |  **Credit Card:** American Express VISA MasterCard Government Purchase Card  |

|  |  |  |
| --- | --- | --- |
|  |  | $ |

Account Number Expiration Date Amount

|  |  |
| --- | --- |
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Card Holder’s Name Card Holder’s Signature

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Billing Address associated with the Credit Card  For the purpose of sending a receipt, please provide the following:

|  |  |
| --- | --- |
|  |  |

Card Holder’s Email Address Card Holder’s Fax Number

|  |  |
| --- | --- |
|  |  **Check or Money Order:** Attach and make payable to Graduate School USA  |

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|  |  **Agency Purchase Order:** Attach the Purchase Order to this application. A completed and signed government training authorization form (e.g., SF-182) can be submitted in lieu of a purchase order.  |

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Participants needing Special Accommodation Services are required to go to the Graduate School USA website and complete the **Participants Request for Special Accommodation Services** form**.** Please submit this form with the application.

Send the application package by mail or email to the following address:

New Leadership Program, Attn: Greg Collins

Center for Leadership and Management
Graduate School USA
600 Maryland Avenue, SW, Suite 330
Washington, DC 20024-2520
Phone: (202) 314-3538

Fax: (202) 479-6813

nlpapp@graduateschool.edu