



# LEADERSHIP

## *Los Alamos*

**LEADERSHIP LOS ALAMOS**  
**Confidential Application**

**(Application Deadline – June 25, 2016)**

### ***Vision Statement***

*Leadership Los Alamos identifies, enlightens, and encourages leaders of diverse backgrounds, occupations, and cultures for the purpose of broadening the understanding of our community and enhancing the quality of leadership.*

*Leadership Los Alamos represents a cross-section of citizens from a variety of backgrounds who bring divergent perspectives to become knowledgeable of Los Alamos issues.*

**PERSONAL DATA**

Full Name \_\_\_\_\_

Preferred Name for Name Tag \_\_\_\_\_ Date of Birth \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ E-Mail \_\_\_\_\_

How long have you lived and/or worked in Los Alamos County? \_\_\_\_\_ years

Do you plan on living or working in Los Alamos for: < 5 yrs    5-10 yrs    > 10 yrs

**EMPLOYMENT INFORMATION**

Present Employer \_\_\_\_\_ Type of Business \_\_\_\_\_

Employer Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Web Site (URL) \_\_\_\_\_

Business Phone \_\_\_\_\_ Fax # \_\_\_\_\_ E-Mail \_\_\_\_\_

Job Title \_\_\_\_\_

Briefly describe your job responsibilities and any significant accomplishments.

**EDUCATIONAL/BUSINESS/PROFESSIONAL AFFILIATIONS (If Any):** (Do not include civic organizations, public activities, or political activities)

Name of Group	Position(s) Held	Period of Affiliation
_____	_____	_____ to _____
_____	_____	_____ to _____
_____	_____	_____ to _____

**COMMUNITY INVOLVEMENT:** Please list in order of importance any community, civic, religious, political, government, social, athletic, or other activities with which you are now or have been involved.

Organization	Position(s) Held	Dates
_____	_____	_____ to _____
_____	_____	_____ to _____
_____	_____	_____ to _____

**EDUCATION:** Highest level attained

High School/GED

Assoc/Tech

College Degree

Post Graduate

**LEADERSHIP INFORMATION**

Have you participated in another community or state leadership program? If yes, please list.

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Name of Program	City/County/Region/State	Dates
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1) What specific knowledge/skills do you hope to gain from your participation in Leadership Los Alamos (LLA)?

2) What specific knowledge/skills do you hope to contribute to LLA?

3) In what kinds of additional volunteer/community/state activities would you like to become more active in the future?

4) What do you consider your most important accomplishment(s) in your community or civic activities? Why?

**ADDITIONAL INFORMATION:** (Other Affiliations, Community Involvement, Etc.)

What additional information, if any, would you like considered in your application to the LLA program?

**LLA SPONSOR AND OTHER REFERENCES**

Please list a LLA graduate/alumnus sponsor and two other people who are knowledgeable about your leadership performance and potential.

Name	Address	Telephone
_____	_____	_____
_____	_____	_____
_____	_____	_____

**TUITION:** If accepted into the LLA program each participant, employer, and/or other person will be billed for the tuition fee of **\$650.00** which covers all program costs, transportation during sessions, and meals.

Person responsible for payment of tuition fee:      Participant      Employer      Sponsor

If person responsible is not participant, please provide a point of contact for payment.

Name	Address	Telephone
_____	_____	_____

**SCHOLARSHIP:** If a scholarship would be beneficial to you or your non-profit organization paying the tuition, please go to the Applying to the Program page at the LLA web site (<http://leadershiplosalamos.com>), complete the Scholarship Application form, and submit it with your application. A request for scholarship does not affect selection into the program.



**LEADERSHIP**  
*Los Alamos*

**2015 – 2016 Program Application**

**COMMITMENT:** If selected as a participant in LEADERSHIP LOS ALAMOS (LLA), I agree to attend the following functions sponsored by the program; the entire opening leadership orientation & retreat and final closing session, and at least 5 of the remaining 7 sessions. I understand that if I miss any of the leadership orientation & retreat or final closing session, or more than two of the remaining seven sessions, for whatever reason, I will be automatically dropped from the program at that time. Missing any two halves of the seven sessions will count as a whole session. In addition, active participation in leadership activities to be completed during the class year is required for graduation. I further understand that any refund of tuition is at the discretion of the LLA Board of Directors.

**CONFIDENTIALITY STATEMENT:** I hereby give LLA permission to share information about my participation in LLA for publicity purposes. I understand the above commitment and agree to be bound by it in signing this application.

I hereby certify that the information in this application is complete and correct.

Applicant's signature \_\_\_\_\_ Date \_\_\_\_\_

**EMPLOYER COMMITMENT:** (Required of all full and part-time employees of a company or organization). This application has the approval of the undersigned organization, and the applicant has our full support and commitment, which includes the time required to participate in the program.

Employer's signature \_\_\_\_\_ Date \_\_\_\_\_

Title \_\_\_\_\_

**Please mail the completed application to:**

**LEADERSHIP LOS ALAMOS  
PO BOX 1380  
LOS ALAMOS, NM 87544**

**Or save the pdf with your name and attach it to an email to:  
*leadershiplosalamos@gmail.com***

We will send a confirmation when we receive your application by mail or email. Please contact us if you do not receive this confirmation within a few days.