DEFENSE CIVILIAN EMERGING LEADER PROGRAM (DCELP) NOMINEE INFORMATION SHEET

COMPONENT / AGENCY INFORMATION				
Army Navy	Air Force Space Force*			
Intelligence Other Federal Agency	· · · · · · · · · · · · · · · · · · ·			
4th Estate Agency/Org:				
NOTE: Speci	fy Command and Unit Name (Except Army and USAF Civilians)			
Functional Community: NOTE: Speci	fy Acquisition, Financial Management, Human Resources or Other			
	of the Air Force Allocation			
NOMINEE IN	NFORMATION			
Prefix/RNK First Name Middle				
	e Last Name Suffix			
Name for Graduation Certificate:				
Federal Civilian				
CIV Grade / Band:*** *** = if Pay Band include GS equivalent	osition Title:			
·	CAC/EDIPI:			
Current Security Clearance:	Date Issued:			
Date of Last Promotion:				
Work Email	Phone: DSN:			
Alternate Email	Alt Phone GOV/PER N INFORMATION			
Organization / Agency /Unit Address:	Physical Address:			
Organization / Figure / Cint Fiduress.	Thysical Taddress.			
Number / Street / Suite	Number / Street / Suite			
City / State or APO / Zip	City / State or APO / Zip			
Supervisor / Commander	Financial POC			
Supervisor Email	Financial POC Email			
Donas (H.: H. eig. ei. G. i				
DODAC / Unit Identification Code	Agency Location Code (RM)			
Attestation. I affirm that the information is complete a	and correct to the best of my knowledge			
Attestation: I affirm that the information is complete a	ind correct to the best of my knowledge.			
Nominee Signature	Date			

DEFENSE CIVILIAN EMERGING LEADER PROGRAM (DCELP) STATEMENT OF INTEREST

The Statement of Interest should <u>not</u> repeat information in the resume, information sheet, or other supplemental materials required for specified program. Rather, it should focus on why you should be selected as a participant in the Defense Civilian Emerging Leader Development Program.

Address, in 500 words or less, the following:

- · your strengths and character traits that make you an ideal candidate for the program
- · the contributions you will make to support your learning and that of your peers
- · how attending the program fits into your professional career development plan
- · the return on investment to your Component/organization and to the Department of Defense

DEFENSE CIVILIAN EMERGING LEADER PROGRAM (DCELP) SUPERVISOR ASSESSMENT

This part is to be completed by the nominee's immediate supervisor (member who is thoroughly familiar with applicant's performance in order to assess leadership potential).

Nominee's Full Name:				
Current Position Title:				
Current Supervisory Level: Employee	Team Lead	er	Supervisor	
Please rate the nominee's PROFICIENCY in each of the following "before and after" assessment of the nominee and not considered in			only to obtain a	
COMPETENCIES		PROFICIENCY		
In somewhat difficult situations; requires frequent guidance. In difficult situations; requires occasional guidance. In exceptionally difficult situations; serves as a key resource and advises others.	Needs Development ¹	Proficient ²	Outstanding/ A Personal Strength ³	
Interpersonal Skills				
Ethical Behavior				
Communication (Written & Oral)				
Agility				
Resilience				
Team Building				
Diversity, Equity, Inclusion & Accessiblity				
Managing Conflict				
Problem Solving				
External Awareness				
Influencing				

DEFENSE CIVILIAN EMERGING LEADER PROGRAM (DCELP) SUPERVISOR ASSESSMENT (continued)

Supervisory and Leadership Endors		his/hom overset/most monformance and movieur	o f
	discussions with this nominee, knowledge of late is ready to participate in this program.	mis/ner current/past performance, and review	01
Immediate Supervisor Title:			
Immediate Supervisor Phone:			
Immediate Supervisor Signature		Date	
Immediate Supervisor Signature Second Level Supervisor Name:			
Second Level Supervisor Name:		Date Last	
•			
Second Level Supervisor Name: Second Level Supervisor Title:	First Middle	Last	
Second Level Supervisor Name: Second Level Supervisor Title: Second Level Supervisor Signate	First Middle		
Second Level Supervisor Name: Second Level Supervisor Title: Second Level Supervisor Signatu Understanding of Program Re	First Middle ure equirements:	Last Date	
Second Level Supervisor Name: Second Level Supervisor Title: Second Level Supervisor Signate Understanding of Program Re I have read and understand the DCEL during regular duty hours to complete	First Middle ure equirements: P program requirements and acknowledge sor program graduation requirements. I have also	Last Date me requirements may involve travel and time	
Second Level Supervisor Name: Second Level Supervisor Title: Second Level Supervisor Signate Understanding of Program Re I have read and understand the DCEL	First Middle ure equirements: P program requirements and acknowledge sor program graduation requirements. I have also	Last Date me requirements may involve travel and time	
Second Level Supervisor Name: Second Level Supervisor Title: Second Level Supervisor Signate Understanding of Program Re I have read and understand the DCEL during regular duty hours to complete leadership to ensure they understand the	First Middle ure equirements: P program requirements and acknowledge sor program graduation requirements. I have also	Last Date me requirements may involve travel and time spoken with my organizational/Component	
Second Level Supervisor Name: Second Level Supervisor Title: Second Level Supervisor Signate Understanding of Program Re I have read and understand the DCEL during regular duty hours to complete	First Middle ure equirements: P program requirements and acknowledge sor program graduation requirements. I have also	Last Date me requirements may involve travel and time	
Second Level Supervisor Name: Second Level Supervisor Title: Second Level Supervisor Signate Understanding of Program Re I have read and understand the DCEL during regular duty hours to complete leadership to ensure they understand the	First Middle ure equirements: P program requirements and acknowledge sor program graduation requirments. I have also hese requirements as well.	Last Date me requirements may involve travel and time spoken with my organizational/Component	

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SUPPLEMENTAL NOMINEE INFORMATION FOR DCELP

DEFENSE CIVILIAN EMERGING LEADER PROGRAM (DCELP)

RESUME TEMPLATE (MAXIMUM OF 6 PAGES)

Please be sure to include all of the following items:

Contact Information:

Name

Home: Address, Phone, Fax, and E-mail (optional) Work: Address, Phone, Fax, and E-mail (required)

Education:

School(s) (name and location)

Degree earned, graduation date

Major field of study for each undergraduate and graduate degree

Non-degree studies:

School, location, major field of study, undergraduate/graduate credit hours earned

Experience/Work History:

Dates, title, grade, agency/company, location, responsibilities/achievements. Focus on results. Be sure to highlight position(s) involving formal supervisory experience. Also, include grade/rank for each position.

<u>Defense/Government Sponsored Training</u> (to include leadership training):

School and course title, date (include sponsoring institution, e.g., Defense Systems Management College, Information Resources Management College/NDU, OPM FEI or Management Development Centers)

Skills/Accomplishments:

Skills, e.g., computer, languages; publications; certifications; licensure; clearances

Activities and Honors:

Community service, awards, professional memberships, hobbies