

Applicant Information

Name: _____

	Prefix Mr./Ms./Dr.	First Name	Middle Initial	Last Name		Suffix Jr./Sr.
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Position Title: _____ Supervisory Level _____

Occupational Series Title: _____ Series Code/MOS: _____

Pay Grade: _____ Date of Last Promotion (Month/Year): _____

Current Security Clearance: _____ *CAC/EDIPI: _____

Work E-Mail: _____

Work Phone: _____ DSN Prefix (If applicable): _____

**Must provide CAC/EDIPI number to Component Representative for application to be considered complete.*

Organization Information

Component: _____ Other-Specify: _____

Organization Name: _____

Organization Mailing Address: _____ Suite: _____

City: _____ State/ APO: _____ Zip: _____

Financial POC: _____	Financial POC Email: _____
DODAC/ _____	Agency Locator _____
Unit ID Code: _____	Code (RM): _____

This area does not apply to Army or Air Force Civilians.

Applicant Affirmation and Signature

I affirm that the information is complete and correct to the best of my knowledge.

 Signature Date

Note: Mouse over the data fields for an explanation of the required information.

Executive Leadership Development Program Statement of Interest

The Statement of Interest should not 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 DoD Executive Leadership Development Program.

Address the following in **500 words or less**:

- 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

Executive Leadership Development Program Supervisor Assessment

Immediate Supervisor Endorsement

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

Nominee's Name	Current Position	Grade
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Supervisory Narrative

In **250 words or less**, provide an assessment of the nominee's leadership potential and how they would benefit from participating in the Executive Leadership Development Program.

Supervisor Endorsement

Based on my personal experience and discussions with this nominee, knowledge of his/her current/past performance, and review of his/her application package, this nominee is ready to participate in this program.

Immediate Supervisor's Title	Immediate Supervisor's E-mail	Immediate Supervisor's Phone
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Signature	Date
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Executive Leadership Development Program Supervisor Assessment

Second Level Supervisor Endorsement

Based on my personal experience and discussions with the nominee's supervisor, I support the nominee's application to the Executive Leadership Development Program.

Second Level Supervisor's Title	Signature	Date
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Executive Leadership Development Program Acknowledgement of Program Requirements

Understanding of Program Requirements

I have read and understand the ELDP program requirements and acknowledge the travel and time requirements which may involve time outside regular duty hours to complete graduation requirements. I have also spoken with my organizational/Component leadership to ensure they understand and support these requirements as well.

Nominee's Signature	Date
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Immediate Supervisor's Signature	Date
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BIOGRAPHY TEMPLATE

Name Title
Component/Organization

<Insert a One Paragraph Narrative here highlighting your Strengths>

PROFESSIONAL WORK EXPERIENCE:

-
-
-

EDUCATION:

-
-
-

SIGNIFICANT TRAINING:

-
-
-

CERTIFICATIONS:

-
-
-

AWARDS AND HONORS:

-
-
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PROFESSIONAL MEMBERSHIPS AND ASSOCIATIONS/PUBLICATIONS:

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