## NOMINEE INFORMATION SHEET FOR DOD LEADER DEVELOPMENT PROGRAMS

Name:						
Prefix: 1	Mr./Ms./Dr. First Na	те	Middle Initial	Last Name	Suffix: Jr./Sr.	
Preferred name (e.g. Jane E. Doe; J						
Organizational I	Name and Offi	ce Symbol:				
Component:				Air Force		
-	Other DoD	Agency/Activi	ty or Interage	ncy:(Specify ag	ency in space provided)	
Occupational Community: Acqu			_	Financial Manag		
Position Title:						
Occupational Se	ries (4-digit co	de):	**CAC/ED	IPI #:		
					Level:	
Date of Last Pro	motion (Mont	h/Year):				
Current Security	•			Date Issued: _		
Work E-mail Address:			Office Phone Number:			
			DSN F	Prefix (if applicable)	) <b>:</b>	
Alt E-Mail Address:			Alt Phone Number:			
Complete Organ	izational Mail	ing Address:				
Number	Street	Suite				
City	State	Zip				
Nominee Signature:				Date:		

Revised – 20 November 2020 Page 1 of 6

<sup>\*\*</sup>Must provide CAC/EDIPI number to Component Representative for application to be considered complete. Federal interagency applicants may leave this section blank.

#### STATEMENT OF INTEREST FOR DOD LEADER DEVELOPMENT PROGRAMS

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 specified DoD Leader Development Program.

Address, in 500 words or less, the following:

- what you consider to be your major strengths and qualifications for the program
- the contributions you will add/bring to the program
- 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
- reason for requesting the desired PME school (DSLDP Only)

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

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

Nominee's Name:					
Current Position:					
Current Position level: _	Employee	Team Leader			
	Member of Fe	llowship Program			
Please rate the nominee's Pl only to obtain a "before and		•	npetencies (this info	ormation is used	
Competencies			Current Proficiency		
		Needs Development	1 Proficient <sup>2</sup>	Outstanding/ A Personal Strength <sup>3</sup>	
Interpersonal Skills					
Integrity/Honesty					

Written Communication
Oral Communication
Continual Learning
Public Service Motivation
Leveraging Diversity
Flexibility
Resilience
Problem Solving
Customer Service
Mission Orientation
Team Building
Decisiveness
Influencing/Negotiating
DoD Mission and Culture

<sup>&</sup>lt;sup>1</sup> Applies the competencies in somewhat difficult situations; requires frequent guidance.

<sup>&</sup>lt;sup>2</sup> Applies the competencies in difficult situations; requires only occasional guidance.

<sup>&</sup>lt;sup>3</sup> Applies the competencies in exceptionally difficult situations; serves as a key resource and advises others.

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

# **Supervisory Narrative** In 250 words or less, provide a narrative that cites your unique perspective on the nominee's proficiencies indicated above. **Supervisory and Leadership 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 Title: Immediate Supervisor E-mail: Immediate Supervisor Phone: Immediate Supervisor Signature Date Second Level Supervisor Title:

Second Level Supervisor Signature

Date

## <u>DEFENSE CIVILIAN EMERGING LEADER PROGRAM (DCELP) SUPERVISOR ASSESSMENT</u>

<u>Understanding of Program Requirements</u>					
☐ I have read and understand the DCELP program resome requirements may involve time during regular duspoken with my organizational/Component leadership requirements as well.	ity hours to complete. I have also				
Nominee Signature	Date				
Supervisor's Signature	Date				

## 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.

#### **Defense/Government Sponsored Training** (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