

CONNECT NEW MEXICO APPLICATION

INSTRUCTIONS

Type or print in black ink. It is important that each section be fully completed. Add additional pages if necessary. Applications must be signed by both applicant and employer/sponsor. The application must be returned, along with a recent 3" x 5" photograph or an electronic photograph suitable for use in publications and for publicity. (Please note that photographs will not be returned.) We are unable to accept facsimile applications.

SELECTION CRITERA

Each year, Connect New Mexico involves 40 to 45 young professionals, ages 25-40. Each applicant must be nominated by a Leadership New Mexico graduate. There is a strong focus on diversity when selecting the class; gender, ethnicity, business sector and geographc location are all considerations.

PROGRAM TUITION

Tuition for the program is \$1,600 and covers all program costs, transportation during sessions, and meals. Participants are responsible for their own transportation to the session locations and hotel accommodations. A limited number of scholarships may be available for those requiring financial assistance. A request for scholarship assistance does not affect selection into the program.

PARTICIPANT RESPONSIBILITY

Participants must agree to attend all of the functions sponsored by the program. Understand that attendance is **mandatory**, and that if more than 1-1/2 days of the session are missed for whatever reason, the participant will be automatically dropped from the program with no portion of the tuition refunded. If the participant fails to meet any part of the obligation of participating, they will be asked to withdraw from the program.

PLEASE EMAIL APPLICATION TO: LEADER@LEADERSHIPNM.ORG

Email with subject line: 2023-2024 Connect Program Application - Last Name, First Name

Leadership New Mexico Albuquerque, NM 87176-5696 Phone: 505.398.1500 Fax: 505.247.4755 www.leadershipnm.org



CONNECT PROGRAM APPLICATION FOR SELECTION

PERSONAL DATA

Full Name:		
Preferred Name for Name Tag:		
Date of Birth: Age:	Male/Female: Race/Ethn	ic Background:
Home Address:		
Business Address:		
Work Phone: ()	Home Phone: ()	Mobile Phone: ()
Fax #: ()	_ Email:	
Spouse/Partner's Name and Occupation	n:	
How long have you lived in New Mexic	0?	
Have you participated in another state	or community leadership program? If so,	
Name of Program	City/County/Region/State	Date
Name of local newspaper (To be used for	r press releases)	
EMPLOYMENT		
Present Employer:		_Beginning Date:
Type of Organization:	Job Title	·
Briefly describe your responsibilities in	your position:	

Please check the category which best describes the area in which you presently work/serve (check only one).

Community/Non-Profit	Business	Education	Government
Health Care	🗆 Law	Media	Religion
□ Labor	□ Social Service	□ Other Specif	ý
EMPLOYMENT HISTORY (Beginning wit Employer	<i>h most recent)</i> Job Title		Period of Service
		······	to
			to
		·····	to
			to
BUSINESS/PROFESSIONAL AFFILIATIC Name of Group	DNS (IF ANY): (Do not inclu Positions Held or Assigr	iments	Period of Affiliation
		<u></u>	to
			to
EDUCATION (High school, college(s), Name/Location of School	advanced degrees and/or s Degree/	specialized training) Certificate	Area of Interest

Activities, offices, and recognitions for special contributions in your education and/or training:

COMMUNITY INVOLVEMENT (Please list in order of importance to you: community, civic, religious, political, government, social, athletic, or other activities with which you are involved or have been a member. Indicate role in the organization.)

	Organization	Position Held	Dates
Please list, in order of importance to you, present and			
past community, civic, religious, political, social or			
other activities			

What do you consider your most important accomplishment in community or civic activities? Why?

What community awards or recognition have you received? When?

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

CONTRIBUTION TO LEADERSHIP

What specific skills/knowledge do you hope to gain from your participation in Connect New Mexico?

TUITION

If accepted into the Connect New Mexico program each participant, financial sponsor, and/or employer will be billed for the tuition fee of \$1600 which covers all program costs, transportation during sessions, and meals.

Will you pay the tuition fee?	□ YES	□ NO
Will your employer/sponsor pay the tuition fee?	□ YES	□ NO
If not, who will be responsible for payment?		
Do you need to be considered for a scholarship for the program?	□ YES	□ NO
If yes, please explain:		

REFERENCES

Please list three people other than your Leadership New Mexico sponsor who are knowledgeable about your leadership performance and potential. In addition to your references, two letters of recommendation should be submitted with the application.

I.	Name:		_Telephone: ()
	Address:	_ City	State	_Zip
II.	Name:		_Telephone: ()
	Address:	_ City	State	_ Zip
Ш	•Name:		_Telephone: ()
	Address:	_ City	State	_ Zip

EMPLOYER COMMITMENT (Required of all part and full-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.

Company Name:		Felephone: ()
Address:	_ City	_State	_Zip

Employer Signature

Date

NOMINATING LEADERSHIP NEW MEXICO ALUMNUS

This applicant has the full support of the undersigned Leadership New Mexico Core Program, Local Government Leadership Program, or Connect New Mexico Program graduate.

Name:		Telephone: ()
Address:	City	State	Zip
LNM Alumnus Signature		Date	

COMMITMENT

If selected as a participant in Connect New Mexico, I agree to attend all of the functions sponsored by the program. I understand that attendance is mandatory, and that if I miss more than 1 1/2 days of the sessions for whatever reason, I will be automatically dropped from the program with no portion of my tuition refunded. I understand that if I fail to meet any part of the obligation of participating, I will be asked to withdraw from the program.

I hereby certify that the information in this application is complete and correct. I hereby give Leadership New Mexico permission to share this information for the purpose of public relations and reports. I understand the above commitment and agree to be bound by it in signing this application.

Applicant Signature

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Date