Year Seventeen: Developing Community Leaders

APPLICATION

APPLICATION DEADLINE

All materials must be emailed or postmarked by no later than **June 30, 2016**. Materials may be emailed to FordFellowship@92Y.org.

APPLICATION INSTRUCTIONS

Please fill out this form clearly and completely and return it, along with your cover letter, curriculum vitae, and two-page essay, by the application deadline.

We also require two letters of recommendation, which must be sent to us directly and privately by your references. Please see the Submission Guidelines section at the end of this form for instructions.

EVENT DATE AND LOCATION

New York City, NY, USA June 7 – June 22, 2017

PART 1: PERSONAL & CONTACT INFORMATION

PERSONAL INFORMATION

- 1. Last Name (family name):
- 2. First Name (given name):
- 3. Date of birth (month/day/year):
- 4. Gender: All Male Female

ELIGIBILITY

- In order to be eligible for this fellowship, you must be:
- 1. At least 21 years old (by June 1, 2017)
- 2. Fluent in English
- 3. Living and working in one of the 2017 Participating Countries

The 2017 countries are: Brazil, People's Republic of China, India, Israel, Mexico, Russian Federation, South Africa, Ukraine, and the United States of America (*only from* Detroit Michigan). *No additions/exceptions will be made.*

EXPECTATIONS

This program is a rigorous learning opportunity. It requires completion of reading, writing, and group assignments prior to and following the residency, full participation in all classes and group activities while in New York, and a commitment to remain involved in the program's future as we build a growing network of community leaders throughout the world.

- 5. Original language:
- 6. Other languages spoken (aside from English):
- 7. Do you have a valid passport? See No

CONTACT INFORMATION

- 8. Preferred email address:
- 9. Home Contact Information:

Full address: Country: Postal Code: Home phone number: Home fax number:

10. Work Contact Information:

Full address: Country: Postal Code: Work phone number: Work fax number:

11. Which address would you prefer we send mail to?
Home Work

EMERGENCY CONTACTS

12. First Emergency Contact: Name: Relationship to you: Address: Country: Postal Code: Phone number: Email:

13. Second Emergency Contact:

Name: Relationship to you: Address: Country: Postal Code: Phone number: Email:

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PART 2: EDUCATION & FELLOWSHIPS

EDUCATIONAL BACKGROUND

14. Please indicate all degrees you have received or are currently pursuing at a college or university:

Degree #1:
Type of Degree (example: B.S., M.A., Ph.D.):
Area of study:
Name of school:
City:
Country:
Date completed:
Honors, awards, other:

Degree #2:

Type of Degree (example: B.S., M.A., Ph.D.): Area of study: Name of school: City: Country: Date completed: Honors, awards, other:

Other degrees (if you have received more than two):

15. Please indicate all relevant certificate programs you have completed or are currently pursuing:

🗌 Yes 🗌 No

☐ Yes ☐ No

OTHER FELLOWSHIPS

- 16. Are you currently the recipient of another fellowship?
- 17. Have you been a fellowship recipient in the past?

If you answered "Yes" to either question above, please describe:

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PART 3: EMPLOYMENT HISTORY

CURRENT EMPLOYMENT

18. Current or most recent position(s):				
Job Title:				
Name of Organization: Address of Organization:				
Dates of employment:				
Type of employment: 🗌 Full-time 🔲 Part-time 🗌 Other:				
Responsibilities:				
Job Title:				
Name of Organization:				
Address of Organization:				
Dates of employment:				
Type of employment: Full-time Part-time Other:				
Responsibilities:				
Other jobs you currently hold (if more than two):				
PREVIOUS EMPLOYMENT				
19. Previous positions (list each):				
19. Previous positions (list each): Job Title:				
19. Previous positions (list each): Job Title: Name of Organization:				
19. Previous positions (list each): Job Title: Name of Organization: Address of Organization:				
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OTHER RELEVANT EXPERIENCE

20. Briefly describe any relevant volunteer experience, community involvement, etc.

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НЕА 21.	LTH & MEDICAL INFORMATION Do you have any physical, emotional, or psychological conditions that we should be aware of? Yes No If yes, please describe:
22.	Do you have any dietary restrictions and/or allergies? Yes No If yes, please describe:
23.	Do you have health and/or medical insurance? Yes No If yes, please indicate the following: Type of coverage: Provider: Policy Number:

25. Do you have access to a computer and the internet? Yes No If yes, where? Home Work Other:

PART 5: REFERENCES

REFERENCE CONTACT INFORMATION

Please list your two references below so that we may contact them.

- 26. **First** Reference Contact Information:
 - Name: Title: Organization: Address: Country: Postal Code: Phone number: Fax number: Email address:

27. Second Reference Contact Information:

Name:	
Title:	
Organization:	
Address:	
Country:	
Postal Code:	
Phone number:	
Fax number:	
Email address:	

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PART 6: YOUR ORGANIZATION

ORGANIZATION PURPOSE

28. In one sentence, please describe the overall purpose or goal of your organization:

ORGANIZATION SIZE

- 29. Number of full-time employees:
- 30. Number of part-time employees:
- 31: Number of volunteers:
- 32: Number of employees directly under your supervision:
- 33. Name and title of your direct supervisor:

ORGANIZATION BUDGET

- 34. Overall budget of organization:
- 35. Where does your funding come from?
- 36. Does your organization have an endowment?

ORGANIZATION OFFICIAL REGISTRATION

- 37. Date officially formed:
- 38. Government or administrative body registered with:
- 39. Location of headquarters / main office:

ORGANIZATION IMPACT

- 40. Number of people served annually:
- 41. Which group of people do you serve? (Example: urban youth, rural women, etc.):
- 42. Geographical reach:

ORGANIZATION GOALS

- 43. Future plans to develop or expand:
- 44. Timing of plans to develop or expand:

PERSONAL IMPACT

- 45. In one sentence, describe your personal contributions to your organization and the population you serve:
- 46. How would you rate the contribution you have made?
- 47. How effective are you as a leader of your organization and in your field? (Give examples.)
- 48. How are the projects you *directly* supervise staffed?

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SUBMISSION GUIDELINES

GENERAL INSTRUCTIONS

Applicants should email the following items to fordfellowship@92Y.org by no later than June 30, 2016:

- 1. Completed application form
- 2. Cover letter addressed to the Ford Fellowship Committee
- 3. Curriculum Vitae / Résumé
- 4. Two-page essay (please see the Essay Topic section, below)

You will be notified of receipt of your application upon its delivery. You will then be apprised of the status of your application by December 31, 2016.

ESSAY TOPIC

In narrative form, describe *all* of the following:

- 1. Your background and your reasons for wanting to participate in this program.
- 2. The issues affecting the well-being and stability of your community. (Examples include inter-group conflict, community health concerns, youth development, and environmental matters.)
- 3. The outcome you hope for, the role you wish to play in that outcome, and the skills you feel you need to make the desired outcome happen.

INSTRUCTIONS FOR REFERENCES

Reference letters should be written by an employer, educator, or other professional contact who has known you for at least 6 months. Letters from personal references (family members or friends) will not be accepted. In the letter, your reference should give an original and detailed account of your character and accomplishments. Your reference should also indicate whether or not they would recommend you for this fellowship, and why.

Reference letters should be private. Applicants should not have access to read reference letters prior to submission. References sent by third parties or forwarded by applicants will be considered invalid.

Your two references should each email their letters directly and privately to <u>FordFellowship@92Y.org</u> by no later than June 30, 2016. They should email their letters from their own email accounts and should not copy the applicant on the email.

For INFORMATION AND QUERIES Phone: 212.415.5473 Fax: 212.415.5798 Email: FordFellowship@92Y.org Website: www.92Y.org/Ford

Ford Motor Company reserves the right to information from this application for their internal tracking purposes. 92nd Street YM-YWHA is an agency of UJA-Federation.

> Thank you for applying to the 2017 Ford Motor Company International Fellowship of 92nd Street Y