

**POMONA LEADERSHIP INSTITUTE  
2017 – 2018 APPLICATION FORM**

**Please submit this Application electronically if possible.**

This Application may be downloaded from [www.pomonafoundation.org/pli](http://www.pomonafoundation.org/pli) and completed electronically, including an electronic signature.

Email completed application by June 2, 2017, to: [pcf@pomonafoundation.org](mailto:pcf@pomonafoundation.org).

**Section I: Profile Information**

NAME _____	HOME CITY _____
EMAIL _____	PHONE (____) _____ ZIP _____

**Section II: Nomination and Referral Source**

How did you learn about the Pomona Leadership Institute? If somebody has nominated you, please list his/her name and contact information: \_\_\_\_\_

**Section III: Community Involvement**

Please list all organizations – including informal associations – that you have been involved in during the past ten years, state your role, and describe particularly significant accomplishments in that role.

**Section IV: Community Interests**

A) In which of the general community issues listed below do you have a strong interest?

***Please check all that apply:***

Community and Civic Engagement

- Communication / Public Relations
- Role of the Media
- Community Engagement

Health and Care Coordination

- Healthy Eating / Active Living
- Homelessness
- Teen Emotional and Physical Wellness
- Senior Citizen Wellbeing
- Environmental Quality

Education and Career Readiness

- Youth Education
- High School Academics and Services
- Private Education and Charter Schools
- Employment/Work Readiness

Economic Development

- Affordable Housing
- Arts and Culture
- Commercial Planning and Re/Development
- Municipal Government
- Job Growth

Crime Prevention and Community Safety

- Domestic Violence
- Gangs
- Sexual Violence and Trafficking
- School and Youth-Based Violence
- Alcohol and Other Drugs

B) In what sort of community role do you hope to serve?

***Please check all that apply:***

- Elective Public Service  
*E.g., City Council, School Board, County Commission, Board of Supervisors, Special District Board.*
- Appointed Public Service  
*E.g., City or County government agencies, board commissions, advisory committees.*
- Director on the Board of a Non Profit or Other Community Organization  
*E.g., Chamber of Commerce, Humane Society, Council of Churches, Boys & Girls Club.*
- Other (please specify): \_\_\_\_\_

**Sections V and VI NOTE:** Please *either* attach a current résumé *or* complete the sections below.

**Section V: Employment History, past 10 years**

*Please begin with most recent; if more space is needed, attach documentation:*

Company \_\_\_\_\_ Dates \_\_\_\_\_

Full Address \_\_\_\_\_

Position(s) Held and Applicable Responsibilities:

Contact Name and Number / Email \_\_\_\_\_

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Company \_\_\_\_\_ Dates \_\_\_\_\_

Full Address \_\_\_\_\_

Position(s) Held and Applicable Responsibilities:

Contact Name and Number / Email \_\_\_\_\_

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Company \_\_\_\_\_ Dates \_\_\_\_\_

Full Address \_\_\_\_\_

Position(s) Held and Applicable Responsibilities:

Contact Name and Number / Email \_\_\_\_\_

**Section VI: Education**

*Please begin with most recent and conclude with high school:*

School	Degree and Major/Area of Focus	Dates
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Describe significant academic accomplishments, honors, awards, or positions held, and relevant dates:

**Section VII: Career Highlights**

Describe what you consider to be your major career or civic engagement accomplishments to date:

**Section VIII: References**

Please list two references (excluding relatives) regarding your community activities or accomplishments:

Reference 1

Name \_\_\_\_\_ Title \_\_\_\_\_

Phone \_\_\_\_\_ Professional Relationship to You \_\_\_\_\_

Reference 2

Name \_\_\_\_\_ Title \_\_\_\_\_

Phone \_\_\_\_\_ Professional Relationship to You \_\_\_\_\_

**Section IX: Specific Accommodations and Preferences**

A) Workshop presenters and locations change depending on the topic, but will always be held in Pomona or a neighboring town. **Please check the option that applies to you:**

I am responsible for my own mode of transportation and have no transportation restrictions.

I require transportation assistance as follows: \_\_\_\_\_

B) Please state any specifically required accommodations (e.g., materials produced in alternate formats, use of equipment/devices, wheelchair accessibility, etc.): \_\_\_\_\_

C) Workshop Preferences:     Weekday                       Saturday                       Sunday

D) List other languages spoken: \_\_\_\_\_

**Section X: Mutual Expectations**

The Pomona Leadership Institute features a series of ten workshops, scheduled one day per month (September – June). In addition to attendance at each monthly session, participants are expected to form sub-groups and complete self-study assignments between sessions in order to continue the learning momentum and maximize program benefit.

Graduates of the Institute will be entrusted with mentoring members of subsequent PLI classes and continuing general involvement with the Institute, including attendance at an annual reunion event.

The Pomona Leadership Institute requests that you make all practical and necessary accommodations to attend scheduled workshops, complete assigned reading and projects between workshop dates, and continue reasonable ongoing involvement with the Institute. **Please check:**  I understand and agree.

**Section XI: Signature and Submission**

By signing and submitting this Application, I understand the expectations and commitments associated with the Pomona Leadership Institute, as outlined online at [www.pomonafoundation.org/pli](http://www.pomonafoundation.org/pli) and in this Application, including the required time commitments.

I affirm that all information I have provided herein is accurate to the best of my knowledge.

Applicant’s Signature \_\_\_\_\_ Date \_\_\_\_\_

Applicant’s Printed Name \_\_\_\_\_

**Deadline:**

The deadline for receipt of this completed application and any attachments is **June 2, 2017**.

**Completing and Submitting This Application:**

This Application may be downloaded from [www.pomonafoundation.org/pli](http://www.pomonafoundation.org/pli) and completed electronically, including an electronic signature. Alternatively you may handwrite your responses.

If possible, please email your completed Application to: [pcf@pomonafoundation.org](mailto:pcf@pomonafoundation.org).

Otherwise please mail your completed and signed Application to:

The Pomona Leadership Institute  
c/o The Pomona Community Foundation  
101 W. Mission Boulevard, Suite 110-201  
Pomona, CA 91766

**Tuition and Fees:**

For the 2017-18 academic year, tuition is WAIVED. The Pomona Leadership Institute will be offered at no charge to participants for this year only.

For questions, please visit [www.pomonafoundation.org/pli](http://www.pomonafoundation.org/pli) or call the Pomona Community Foundation at (909) 784-5327, Monday-Friday, 9am-5pm.