***FELLOWSHIP FOR EMERGING LEADERS IN MINISTRY* APPLICATION**

**Instructions**

Through a creative alliance between Syracuse University and Le Moyne College, the *Fellowship for Emerging Leaders in Ministry* program offer a distinctive setting to form leaders that are empowered to thrive within challenging times. Those who participate in the Fellowship focus on various aspects of leadership development, with the goal of thriving vocationally and enhancing the vitality of the communities they serve.

Drawing deeply on the latest research in leadership, the primary goals of the program are as follows:

1. Provide knowledge and skills for increased impact in leadership, team building and community-building
2. Nurture self-awareness and ongoing personal spiritual development
3. Increase effectiveness and a sense of accomplishment
4. Share educational and other relevant resources
5. Raise the level of vocational fulfillment.

The *Fellowship for Emerging Leaders in Ministry* Admissions Committee will only review fully completed applications. An application is complete when the Application and Sponsor Statement are received.

**Personal Data**

First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_ Middle Initial: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Prefix (Mr., Ms.): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Suffix (Jr., II): \_\_\_\_\_\_\_\_\_\_\_\_ Gender: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nickname/Familiar Name for Badge: \_\_\_\_\_\_\_\_\_\_\_\_\_ Country of Citizenship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth (MM/DD/YYYY): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Contact Information**

Organization Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title or Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Division (if applicable): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Organization Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Ultimate Parent Organization Name (if different from Organization Name): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street (PO Box accepted outside U.S.): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street (Line 2): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Country: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip / Postal Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Organization Website: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Organization Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Home Address**

Street: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Country: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip / Postal Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mobile Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Preferred Mail Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Organizational Data**

Your Ultimate Parent Organization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Ministry or Services: \_\_\_\_\_\_\_\_\_\_\_\_\_

Annual Budget (in USD): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Number of Employees: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Your Organization / Division: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Ministry or Services: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Annual Budget (in USD): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Number of Employees: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How many reporting levels are above you? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What is the title of the person to whom you report? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please describe your organizational hierarchy. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Denomination: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Specify Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What function best describes your position: Specify Other:

**Professional Data/Work Experience**

Please list your three most recent positions, starting with your current role. If the positions are all within the same organization, please list them in order of promotion starting with your current role.

1. Name of Organization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title or Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

From (MM/YYY): \_\_\_\_\_\_\_\_\_\_\_\_\_\_ To (MM/YYY or CURRENT if employed): \_\_\_\_\_\_\_\_\_\_\_\_

2. Name of Organization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title or Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

From (MM/YYY): \_\_\_\_\_\_\_\_\_\_\_\_\_\_ To (MM/YYY or CURRENT if employed): \_\_\_\_\_\_\_\_\_\_\_\_

3. Name of Organization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title or Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

From (MM/YYY): \_\_\_\_\_\_\_\_\_\_\_\_\_To (MM/YYY or CURRENT if employed): \_\_\_\_\_\_\_\_\_\_\_\_\_

Please estimate total number of years of professional experience: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please describe your current responsibilities including your level in the organization. \_\_\_\_\_\_\_\_

**Education**

High School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Year: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

College/University: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Year: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Seminary: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Year: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Degree (highest level attained): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Objectives**

* Please explain your learning objective and describe what you think other participants will learn from you.
* Please describe how you will make time each day to meet your daily responsibilities, nourish your spiritual life as well as complete the work required over the course program.
* What factor has the most influence on your decision to apply to this program? Please specify.
* How did you learn about this program?

If a previous participant / alumnus of the program, please specify.

Participant Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Year: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Application Essays

The *Fellowship for Emerging Leaders in Ministry* program includes three components: leadership development, spiritual renewal, and skills-based development.

* Please provide a 3-5 paragraph summary of the ministry related leadership development programs you have attended. What did you learn? What do you still need to work on?
* Please provide a 3-5 paragraph spiritual autobiographical essay which highlights the journey of your vocation and calling to ministry up to the present. (If you wish, please include any experiences that you might wish to share of God inviting you to service).

We strive to host inclusive, accessible events that enable all individuals, including individuals with disabilities, to engage fully. Please indicate below if you will require accommodations to participate in this program.

I will need accommodations in order to participate in this program.

Yes / No

Type of accommodations requested:

\_\_\_ Assistive listening device

\_\_\_ Captioning

\_\_\_ Reserved front row seat

\_\_\_ Large print

\_\_\_ Advance copy of slides to be projected

\_\_\_ Wheelchair access

\_\_\_ Wheelchair access to working tables throughout room

\_\_\_ Gender neutral bathroom

To assist our program staff with their planning, please indicate in the area below if you have any dietary restrictions:

\_\_\_ Vegetarian

\_\_\_ Vegan

\_\_\_ Gluten Allergy

\_\_\_ Nut Allergy

\_\_\_ Shellfish

\_\_\_ Dairy Allergy

\_\_\_ Other dietary concern or allergy not listed

Thank you for taking the time to complete this application. Please save and attach your completed form and return by August 1, 2020.

## **To Submit Your Application:**

## **Please submit your application directly to the Admissions Committee at** [**clflores@syr.edu**](mailto:clflores@syr.edu)

**The Admissions Committee will review completed applications only. An application is complete when both the Application and Sponsor Statement are received.**

# ***Terms & Conditions***

## ***Language Proficiency***

## ***Proficiency in spoken and written English is essential for participation in the Fellowship for Emerging Leaders in Ministry program.***

## ***Cancellation***

***Due to program demand and the volume of pre-program preparation, cancellations or deferrals must be submitted in writing more than 14 days before the program start date.***

***I have read the cancellation policy and agree to the terms stated: (please initial here) \_\_\_\_\_\_\_***

***Registration***

***Upon admittance into the Fellowship for Emerging Leaders in Ministry Program, participants will be given information on how to complete registration. Registration must be completed by the deadline; the portal promptly closes on August 28, 2020.***

***I have read the registration policy and agree to the terms stated: (please initial here) \_\_\_\_\_\_\_\_***

## ***Statement of Truth***

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## ***By checking this box, I certify that all the information and accompanying material provided in connection with this application are authentic and accurate.***

## ***Community Values Statement***

***Syracuse University and Le Moyne College are governed by a set of community values that foster honesty, respect for others, and accountability for one’s actions. We consider these values essential for a safe and productive learning environment for all.***

## ***Discrimination Policy***

***In accordance with our policies, Syracuse University and Le Moyne College do not discriminate against any person on the basis of race, color, sex or sexual orientation, gender identity, religion, age, national or ethnic origin, political beliefs, veteran status, or disability in admission to, access to, treatment in, or employment in its programs and activities.***

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