

*Classified Professionals*  
State Center Community College District

1171 Fulton Street · Fresno, CA 93721

## 2021 Leadership State Center Class XX Application

Name: \_\_\_\_\_ How Long in Position: \_\_\_\_\_

Title: \_\_\_\_\_ Phone Ext.: \_\_\_\_\_

Work Location/Campus: \_\_\_\_\_

Email: \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_

**Instructions:** Complete all questions listed below and attach additional pages, if necessary. Give the third and fourth pages (Supervisor Recommendation) to your immediate supervisor. They will submit their portion separately. Submit pages one and two of your completed application to Erin Kent ([erin.kent@sccd.edu](mailto:erin.kent@sccd.edu)) no later than 5:00 p.m. on June 15, 2021.

1. Why are you interested in being involved with the Leadership State Center Class?

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2. What are your career goals?

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3. In your opinion, what are the characteristics of a successful leader?

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4. How have you demonstrated these qualities in your own experience?

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5. What is your expectation of this class?

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6. Have you ever been previously enrolled in a prior Leadership State Center Class?  YES  NO

If yes, please explain why you did not finish.

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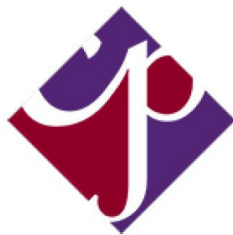
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7. Are you able to make the time commitment for the class? One Friday per month from July through December, 8:00 a.m. to Noon (specific dates to follow) with homework assignments to be completed outside of class time (1-4 per month). Missing any portion of a class will count against attendance. Participants missing more than one class will not be able to graduate from the program. All absences, partial and full, will be reported to your direct supervisor.

YES  NO

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date



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## 2021 Leadership State Center Class XX Application

### Supervisor Recommendation

(To be completed by applicant's supervisor)

**Instructions:** Your employee has applied for entrance into the 2021 leadership State Center Class XX. Please complete and submit this portion of the application, along with a letter of recommendation for your employee, to: Erin Kent ([erin.kent@sccd.edu](mailto:erin.kent@sccd.edu)) no later than 5:00 p.m. on June 15, 2021.

Applicant's Name: \_\_\_\_\_

1. Do you recommend the applicant for participation in State Center Leadership Class XX?

YES  NO

If you marked "YES", please complete the remaining questions. Attach additional pages if necessary. If you marked "NO", stop here, sign and submit.

2. In your opinion, why is this applicant an excellent candidate for the Leadership State Center Class?

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3. What is your expectation of this class for your employee?

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4. What leadership qualities has the applicant demonstrated in their position?

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5. Are you willing to release the applicant from their position to attend the class and if necessary, complete assignments? The class meets one Friday per month from July through December, 8:00 a.m. to Noon (specific dates to follow). Missing any portion of a class will count against attendance. Participants missing more than one class will not be able to graduate from the program. All absences, partial and full, will be reported to you.

YES  NO

\_\_\_\_\_  
Supervisor's Signature

\_\_\_\_\_  
Date