

**QUEENSBOROUGH EMERGING LEADERS PROGRAM**

APPLICANT INFORMATION	
Full Name:	
Last _____	First _____ M.I. _____
Street Address _____ Apartment/Unit # _____	
City _____	State _____ ZIP Code _____
Home Phone: (    ) _____ CUNY ID: _____	
Preferred Email: _____	
LEADERSHIP EXPERIENCE	
Are you a member of a Student Organization or Club?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, what is the name of the student organization or club?	
Are you an officer for a club?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, which position do you will you hold for the upcoming academic year?	<input type="checkbox"/> Club President <input type="checkbox"/> Club Senator <input type="checkbox"/> Club Vice President <input type="checkbox"/> Other Officer _____
Are you a member of a community organization?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, what is the name of the community group organization?	
Have you held a leadership role in a community group or organization?	<input type="checkbox"/> Yes, if yes, please list <input type="checkbox"/> No

Essay Questions: Please attach two essays answering the following questions.

1. Please write an essay detailing why you wish to receive leadership training and how this training will benefit you and the college. Please answer in 250 words or less.
2. What characteristics do you believe make a great leader? Tell us about a time you had to lead. Please answer in 250 words or less.

Return this application, your essays and one letter of recommendation to the Office of Student Activities, Student Union Building, lower level. Questions? Please contact Ms. Rivera at 718-631-6233 or GRivera@qcc.cuny.edu. Thank you for your interest in the Emerging Leaders Program.