

**Defense Civilian Emerging Leader Program (DCELP)
Application Form**

Name: _____
Prefix :Mr./Ms./Dr. First Name Middle Initial Last Name Suffix: Jr./Sr.

Preferred first name: _____

Work e-mail address: _____

Work phone: _____ Work fax number: _____

Home phone: _____ Home fax number: _____

Home e-mail address (optional): _____

Home mailing address: _____

Employing Component: Army Navy/USMC Air Force 4th Estate Intelligence

If Army, Navy, or Air Force, list major command: _____

If 4th Estate or Intelligence, list employing agency: _____

Job title: _____

Occupational Series (4-digit code)

Pay Plan/Pay Schedule: _____ Permanent Grade: _____

Date of last promotion: _____
If in a pay banding system, list equivalent GS grade level _____

Are you currently in an acquisition position? Yes No

If yes, which career field? _____

If no, to which community do you currently belong? FM H.R.

Are you certified in any Acquisition field(s)? Yes No

If Yes, in which field(s) and at what certification level (e.g., I, II, III): _____

If Financial Management, which career field? _____

If HR which parenthetical? _____

Organizational Information

Organizational name and symbol: _____

Organizational mailing address: _____

Work phone: _____ Work fax number: _____

Supervisor's Name and Title: _____

Supervisor's e-mail address: _____

I certify that all information contained in this application is true and accurate to the best of my knowledge.

Nominee's Signature

Date

PRIVACY ACT INFORMATION

Authority: The Government Employees Training Act of 1958 (USC, Title 5, 4101 to 4118), EO 9397, November 1943 (SSN).

Purpose and Use: Used in the administration of the Federal Training Program.

Disclosure: Personal information provided in this application package is given on a voluntary basis. Failure to provide this information, however, may result in ineligibility for participation in training programs.

Revised 2/02

Defense Civilian Emerging Leader Program (DCELP) Statement of Interest

The Statement of Interest should not repeat information in the resume, information sheet, or Narrative Statement of Achievements. Rather, it should focus on why you should be selected as a participant in DCELP.

Address, in 500 words or less, the following:

- ❖ What you consider to be your major strengths and qualifications for the program?
- ❖ What contributions you will add/bring to the program?
- ❖ How will attending this program fit into your professional career development plan?
- ❖ What is your reason for requesting admission into DCELP?
- ❖ What will be the return on investment to your Component/organization and to the Department of Defense?

Defense Civilian Emerging Leader Program (DCELP)
Supervisor's Assessment of Nominee's Competency, Proficiencies and Leader Potential

(This part is to be completed by your immediate supervisor to assess your leadership potential)

Nominee's Name: _____

Current position: _____

Current Position level: ___ Employee ___ Team Leader ___ Intern or Member of a Fellowship Program

Please rate the nominee's proficiency in the following competencies: Competencies	Current Proficiency		
	Needs Development ¹	Satisfactory ²	Outstanding/ A Personal Strength ³
Interpersonal skills			
Integrity/Honesty			
Written Communication			
Oral Communication			
Continual Learning			
Public Service Motivation			
Leveraging Diversity			
Flexibility			
Resilience			
Computer Literacy			
Problem Solving			
Customer Service			

¹ Applies the competencies in somewhat difficult situations; requires frequent guidance.

² Applies the competencies in difficult situations; requires only occasional guidance.

³ Applies the competencies in exceptionally difficult situations; serves as a key resource and advises others.

Technical Creditability			
Mission Orientation			
Team Building			
Decisiveness			
Influencing/Negotiating			
DOD Mission and Culture			

Based on my personal experience and discussions with this nominee, knowledge of his/her current/past performance, and review of his/her application package, I think he/she has leadership potential to take on additional responsibility as a leader in the Department of Defense: _____ Yes _____ Not ready now

I endorse the candidate for the Defense Civilian Emerging Leader Program (DCELP).

Immediate Supervisor: _____

Title: _____

Signature: _____ Date: _____

Second Level Supervisor: _____

Title: _____

Signature: _____ Date: _____

To be completed by the Component:

Statement on anticipated return on investment (i.e., planned utilization and how DCELP will benefit the Component/agency and DOD):

DoD Component/Agency Official: _____

Title: _____

Signature: _____ Date: _____