



Neighborhood Leadership Development Program

Application Form

Registration Information:

Completed applications must be submitted along with the required program fee of \$75 by May 8th to be considered for admission into the Neighborhood Leadership Development Program. A limited number of scholarships are available for persons demonstrating financial need. To apply for a scholarship, please submit a completed scholarship request form, along with the required signatures, no later than May 1st with your application form. All participants who withdraw before May 1st, as well as those persons not selected for admission into this year's program, will receive a full refund. Participants who withdraw between May 2nd and the first scheduled meeting will receive a partial refund equal to half of the program fee. There will be no refunds given to participants who withdraw after the first scheduled meeting.

PART I: Personal Information

Please type or print legibly. If necessary, please use additional pages and submit with application.

Name: _____ Council District: _____

Mailing Address: _____

City, State, Zip Code: _____

Daytime Phone: (____) _____ Email: _____

Organization: _____ Title: _____

Contact Information:

Neighborhood Resource Center ♦ P.O. Box 120246 ♦ San Antonio, TX ♦ 78212-9446
Phone: 735-0586 ♦ Fax: 735-3204 ♦ E-mail: nrcsa@swbell.net ♦ Website: www.nrc-sa.org

"Leadership and learning are indispensable to each other." -John Fitzgerald Kennedy

FOR OFFICE USE ONLY:

Application: _____

Scholarship Request Form: _____

Check #: _____ Date: _____

Accepted: _____ Date: _____

Scholarship Approved? _____

Notified: _____

Part II: Community Experience

What positions, if any, have you held with your current organization? Please specify dates for each position.

What other forms of involvement have you had in the neighborhood/community over the past five years?

What special skills or talents do you feel you bring to your neighborhood/community?

What skills would you like to further develop in order to make yourself a more effective leader and enhance your level of neighborhood/community involvement?

What topics would you like to see covered in this Leadership Development Program?

Signature_____

Date_____



Neighborhood Leadership Development Program (NLDP) Scholarship Request Form

This program is a six-week program designed to develop and enhance the personal leadership and communication skills of key representatives from neighborhoods and communities in Bexar County. A limited number of scholarships are available for persons demonstrating financial need.

Name: _____ Council District: _____		
Mailing Address: _____		
City, State, Zip Code: _____		
Daytime Phone: (____) _____ Email: _____		
Indicate the reasons why you are seeking financial assistance in the space below.		
To the best of my knowledge, all information on the Scholarship Request Form is correct.		
Signature _____		Date _____
Please provide a name and signature from an officer or representative (other than yourself) from your organization.		
Name	Title	Signature
Please provide the name and signature of the city councilperson from the district in which your organization is located. <i>Note: Persons applying from outside city limits (O.C.L.) may submit a signature from any representative of their local government.</i>		
Name	District/Title	Signature

Send your completed scholarship request form along with a program application to:

Neighborhood Resource Center ♦ P.O. Box 120246 ♦ San Antonio, TX ♦ 78212-9446 ♦ Fax: (210)735-3204