

# GINJ Leadership Institute

Fall 2009 Application

DEADLINE FOR SUBMISSION IS July 7, 2009

Required fields are marked with a \*

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## CONTACT INFORMATION

\* Name: \_\_\_\_\_

\* Address: \_\_\_\_\_

\* City: \_\_\_\_\_ \* State \_\_\_\_\_ Zip Code: \_\_\_\_\_

\* Home Phone \_\_\_\_\_ Home Fax: \_\_\_\_\_

\*Cell \_\_\_\_\_

Business Phone: \_\_\_\_\_ Business Fax: \_\_\_\_\_

Business E-mail: \_\_\_\_\_ Home E-mail: \_\_\_\_\_

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## DEMOGRAPHICS

Completion of this section is helpful to ensure diverse representation.  
Please check appropriate selections.

\*Place of Birth: \_\_\_\_\_ \*Sex: Male \_\_\_ Female \_\_\_

\*Ethnic: African American \_\_\_ Hispanic \_\_\_ Native American \_\_\_  
Caucasian \_\_\_ Asian \_\_\_ Other: \_\_\_\_\_

\*Age range: 18-23 \_\_\_ 24-35 \_\_\_ 36-49 \_\_\_ 50-65 \_\_\_ 66+ \_\_\_

Do you require special assistance in any area? If so, please let us know what we need to assist you with:

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## EDUCATIONAL BACKGROUND

Please check answers where appropriate.

Check what applies: \_\_\_ GED \_\_\_ High School Grad \_\_\_ Some College  
\_\_\_ College Grad \_\_\_ Other:

Do you have a mentor? \_\_\_ Yes \_\_\_ No Have you ever had a mentor? \_\_\_ Yes \_\_\_ No

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**COMMUNITY/VOLUNTEER WORK**

List Community / Volunteer Work in order of importance to you:

1)

Name of Organization: \_\_\_\_\_ City\_\_\_\_\_ State\_\_

Years Involved: \_\_\_\_\_

Your Involvement:

2)

Name of Organization: \_\_\_\_\_ City\_\_\_\_\_ State\_\_

Years Involved: \_\_\_\_\_

Your Involvement:

Briefly describe you two major contributions or achievements in your community / volunteer work:

Describe any barriers that have kept you from becoming active in your community:

Have you ever held a leadership position in your neighborhood, church, community, or other organization? Yes \_\_\_ No \_\_\_

If yes, have you held an elected position, or ran for office? Yes \_\_\_ No \_\_\_

If yes, indicate the position and outcome of the election:

Local/Ethnic Newspaper Information: (not the Star Ledger)

Newspaper Name:

Editor's name, email address, phone number

Address:

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**CURRENT AND PREVIOUS EMPLOYMENT**

Current employers name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip Code: \_\_\_\_\_

Your title: \_\_\_\_\_

How long have you worked there? \_\_\_\_\_

What significant contribution/achievement have you made in your current employment?

Previous employers name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Title: \_\_\_\_\_

How long did you work there? \_\_\_\_\_

What significant contribution/achievement have you made in your previous employment?

Chosen participants are expected to remain active in their local neighborhood, civic, and/or community organizations/activities. Will you be able to begin and / or continue in this community building effort? \_\_\_Yes \_\_\_No

Please elaborate how:

If chosen, I commit to attend all of the six all day Saturday institutes. Yes\_\_No\_\_  
If yes, please sign and date below:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**RETURN NO LATER THAN July 7, 2009 TO:**

**Governing Institute of NJ  
Attn: Executive Director  
24 Grant Street, Newark, NJ 07104  
973-715-0734 fax 973-746-3026**

[Leaders@ginj.org](mailto:Leaders@ginj.org) www.ginj.org