



Leadership Mastery Institute: FUERTE Better YOU Program

Application for Admission

Please answer all questions. This application must be fully completed and signed before review by the Admissions Committee. Please type or print legibly.

Hello Student Applicant!

Are you ready to be pushed to your full potential? Are you ready to learn how to be strong and visible at work? Before you get started, carefully read the six criteria for the program. All six, must be a yes to apply.

Criteria 1: Are you a young woman of color in the age range of 19-30 years old?

Criteria 2: Are you able to attend all 5 sessions. This is a hybrid course, so most days are virtual. **You can only miss 1 Saturday for a real emergency**, you will have to provide evidence; no exceptions. So that means, you must figure out travel, work, and childcare (if applicable) challenges before signing up.

Criteria 3: Are you able to be on a weekly call with your group?

Criteria 4: If you are asking for a scholarship, you will have to produce evidence of your annual income?

Criteria 5: Are you willing to take the coaching you will receive from Coach, Instructors, and Mentors in the program?

GENERAL INFORMATION

NAME:

<i>Last</i>	<i>First</i>	<i>Middle Initial</i>
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DATE OF BIRTH:

ETHNICITY:

Are you first generation in the U.S.?

YES

NO

Marital Status :Single, Married, other

TITLE OR POSITION:

Children (Ages):

COMPANY/ORGANIZATION NAME:
(Print Clearly)

COMPANY/ORGANIZATION ADDRESS:
(P.O. boxes accepted outside U.S.)

	<i>Street</i>	<i>City, State</i>	<i>Zip/Postal Code</i>
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COMPANY/ORGANIZATION TELEPHONE:

FAX:



COMPANY/ORGANIZATION WEBSITE:	Your EMAIL:
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YOUR HOME ADDRESS:

<i>Street</i>	<i>City, State</i>	<i>Zip/Postal Code</i>		
YOUR PHONE #:	PREFERRED MAILING ADDRESS: (Please circle choice)	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;">Business Address</td> <td style="width: 50%; text-align: center;">Home Address</td> </tr> </table>	Business Address	Home Address
Business Address	Home Address			

PROFESSIONAL EXPERIENCE

Manufacturing

- Aerospace/Automotive/
Transportation Equipment
- Agriculture, Food, and Beverage
- Biotechnology
- Chemicals
- Consumer Products
- Energy/Extractive Minerals
- Heavy Capital Intensive/
Raw Materials Suppliers
- High Technology/Electronics
- Highly Diversified
Mfg and Non Mfg
- Machinery and
Equipment Manufacturers
- Medical/Healthcare Devices
- Paper and Forest Products
- Pharmaceuticals

Non Manufacturing

- Accounting
- Advertising
- Advocacy/Legal Services
- Broadcasting
- Commercial Banking
- Computer-Related Services
- Construction
- Consulting
- Education
- Engineering
- Entertainment/Leisure
- Environmental Conservation
- Food Service/Lodging
- Foundation/Grant making
- Investment Management
- Military
- Printing/Publishing
- Real Estate
- Retailing/Wholesaling
- Social Services
- Telecommunications
- Trading
- Transportation
- Utilities
- Other Communications
- specify:*
- Other Nonprofit
- specify:*



WHAT FUNCTION BEST DESCRIBES YOUR POSITION? (check one only):

- Accounting/Control Information Service Planning Research & Development
- Engineering Law Product Development Religion
- Finance Logistic Project Management Research & Development
- Fundraising Manufacturing/Operations Public Relations Sales
- General Management Marketing Purchasing Teaching Human Resources
- Medicine Religion Other:

PLEASE CHECK YOUR CURRENT INDUSTRY (check one only):



List your positions in **reverse chronological order, starting with your current one**. If all positions are in the same company, please give the major promotional sequence.

NAME OF COMPANY	TITLE OR POSITION	FROM - TO <i>(Month/Year)</i>

Please estimate your total years of professional experience: _____

Please describe your responsibilities in your current position:

List your **current** volunteer status and/or if you serve on any non-profit boards.

ORGANIZATION	POSITION	DESCRIBE DUTIES

Please estimate your total years of service to the community/philanthropy efforts: _____

EDUCATION

DEGREE (check only highest level attained):

- BA/BS
 MA/MS
 MBA
 JD/Law



PhD Foreign Diploma Other
University: _____ Graduation Year: _____

LEADERSHIP EXPERIENCE

Please explain your reason for applying to this program. Also, explain the value you will bring to the other young women in the program.

What has been your greatest leadership/professional challenge in your career thus far?

Have you had a mentor? If so, what is your experience with a mentor?



**PLEASE RETURN THIS APPLICATION NO LATER THAN 15 DAYS BEFORE
START DATE**

EMAIL:

Applications may be submitted via email
to: luzcaninobaker@me.com

PAYMENT OPTIONS

If accepted into the program, who will be paying for it? (check one)

- I am paying for the tuition My company is paying for the tuition

Provide sponsor name: _____

There is a \$200 required deposit once accepted into the program.

If you are paying for it, which payment plan (below) would you be interested in?
(check one)

- One Payment (\$1200) Two Payments
Half (\$600) upfront and half (\$600) before
the end of the program

(Must provide credit card- we will automatically charge it)

CANCELLATION POLICY

Deposit is due within 10 days of acceptance to the program. Requests to cancel received prior to 10 days before the program start date will receive \$200 deposit back.

Once the program starts all applicants are responsible for the full cost of the program, no exceptions



I certify that all the information and accompanying material provided in connection with this application are authentic and accurate to the best of my knowledge.

SIGNATURE _____ OF _____
APPLICANT: _____ Date: _____

CONFIDENTIAL: The information you provide is for use by the Admissions Committee only.

EMAIL:

Applications may be submitted via email
to: luzcaninobaker@me.com