

National Council on Black American Affairs (NCBAA)

an affiliate of the

American Association of Community Colleges (AACC)

APPLICATION FORM

Dr. Carolyn Grubbs Williams
Leadership Development Institute for
African American Midlevel Administrators in Community Colleges
October 16-20, 2017
Baltimore, Maryland

Section I, Personal Data

Prefix	First Name	MI	Last Name	Suffix
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Position Title	Department or Office			
<input type="text"/>	<input type="text"/>			
Name of Institution	Campus			
<input type="text"/>	<input type="text"/>			
Address	Telephone	Fax		
<input type="text"/>	<input type="text"/>	<input type="text"/>		
	Work	Mobile		
	<input type="text"/>	<input type="text"/>		
City	State	ZIP	Preferred E-mail Address	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	

Section II, Nominator's Data (Nomination should be by your President or designee)

Prefix	First Name	MI	Last Name	Suffix
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Position Title	Department or Office			
<input type="text"/>	<input type="text"/>			
Name of Institution	Campus			
<input type="text"/>	<input type="text"/>			

Address		Telephone	Fax
<input type="text"/>		<input type="text"/>	<input type="text"/>
City	State	ZIP	Preferred E-mail Address
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Section III, Other Application Requirements

Check (Click-on) Box to Confirm Understanding of each of the Following:

- Verify that **Nominator's Submission** on your behalf, to the address below, has been requested.
- Attach **Current Résumé**.
- Attach **Participant's Statement of 300 Words**, addressing the following areas:
 - Summary of your community college experience.
 - Leadership contribution to student success.
 - Leadership in program development designed to enhance African American student access, success, retention, and transfer.
- Check** in the amount of \$1500.00 will be made payable to NCBA.
- College/district** will mail fee separately.
- DEADLINE** for receipt of all items by NCBA is **October 1, 2017**.
- Transportation, lodging and meals** are the participant's responsibility.

Signature: _____ **Date:**

eMail Completed Application to
Dr. Marian C. Shivers
Dean of the Institute
 marianshivers@bellsouth.net