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Faculty Leadership Collaborative



2017 Application

Application Deadline: August 12, 2016 at 5:00 p.m. (Late or Incomplete Applications Will Not Be Considered)

Applicant Information Form

Last Name:	First Name:	Middle Initial:		
Degree(s):	Rank:	Series:		
Step:	% Time of Academic Appointment: School:			
Home Department:				
Best E-mail Address to Contact Applicant:				
Campus Box No	: Work Location:	Work Location:		
Home Address:				
Home Phone:	Cell Phone (optional):	Pager (optional):		
*Name of Dept. Chair, Division Chief or Director Providing Recommendation:				
Email Address:		Campus Box No.:		

No personal information will be disclosed except to Coro personnel



Reflection Questions

Your responses to the following questions are required as part of your application:

- A. Please describe your current role at UCSF and how you envision developing or changing your role in the future. Please explain your reasons for wanting to participate in the UCSF-Coro Faculty Leadership Collaborative (750 words or less)
- B. Please describe a situation when you were a member of a team and reflect on what characteristics made that team successful or not. (750 words or less)

Please observe the following guidelines in preparing answers to the above questions:

- Your full name, page number and "Question A or B" should appear on each page.
- Begin each essay on a separate piece of paper.
- Restate the essay question at the beginning of each essay.

^{*}Note: If you submit a letter of reference from your Division Chair or Chief instead of from your Department Chair or Director, the Division Chair or Chief's letter of reference must contain a signed concurrence from your Department Chair/Director in order for the letter of reference to be deemed complete.

For Our Information

To assist UCSF in improving its program recruitment, please state how you learned about the UCSF Faculty Leadership Collaborative. Please be as specific as possible.

☐ Colleague (pleas	e identify): ment from (please identify):	
	tor (please identify):	
Other:	tor (produce radinary).	
_	ly applied to any Coro pro	gram?
□No□Y	es If yes, when?	Which program?
Have you previous	ly participated in a Coro p	rogram?
□No□Y	es If yes, when?	Which program?
Have you previous	ly participated in any leade	ership program?
□No□Y	es If yes, when?	Which program?
	plication, I affirm that:	the best of my belief and knowledge, the information I have given is
Department Chair/D Chief, I understand t	irector or Division Chair or C he letter of recommendation	dered incomplete without a recommendation letter from my chief. If my letter of recommendation is from my Division Chair or must contain a signed concurrence from my Department adation to be deemed complete.
☐ I understand that	late and/or incomplete appli	ications will not be accepted.
☐ My Department C program schedule.	Chair supports my time comn	nitment to this program, including full attendance throughout the entire
I understand no I from the remainder of		ed. If I do miss a session I understand I will be asked to excuse myself
unsatisfactory attend		erformance proves unsatisfactory due to lack of interest or ability, violation of confidences shared during the program, or for any reason overall program.
indicated for the 20	917 program (Spring,10 ses nerwise noted). See Program	p Collaborative, I affirm that I will be available for all activities sion program plus graduation celebration - Thursday, 10:00 a.m. to a Schedule on page 2 of the UCSF Faculty Leadership Collaborative
Signature By clicking "I Agree" the declarations liste		electronic signature to this document, and agreeing and attesting to
☐ I Agree	Today's Date:	
Name of Applica	ant (please print):	Today's Date:

^{*} Personal or family emergencies that arise and impact attendance on participation in the Coro program will assessed on a case-by-case basis.