

## Application

Early bird application deadline is February 20, 2012. All application submissions must be received on or before March 21, 2012.

Personal Information <sup>1</sup>	
Name:	Title:
Organization/Institution Name:	
Street Address:	City, State, ZIP:
Phone:	E-mail:
Alternate Phone:	Alternate E-mail:
FAX:	Years With Current Organization:
Years of Work Experience:	Race/Ethnicity:
Gender Identity:	Will You Require an Accommodation Due to a Disability?
Sexual orientation and or identity:	Age:

<sup>1</sup> The Council seeks a diverse and inclusive pool of applicants and program participants. Providing demographic information is completely voluntary. If you prefer not to answer any of the individual demographic questions, please indicate this preference in the appropriate space. This information will be kept confidential and used for statistical summaries only.

## Commitment to Full Participation

Full participation entails preparing for and attending all program learning sessions and participating in all related programs and activities.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

By checking the following box, you confirm that you understand and agree to the commitment required for participation in this program. Applicant:

I hereby certify that the information hereunder is correct to the best of my knowledge and understand that falsification of this information is grounds for disqualification or dismissal from the program to which I am applying. I hereby authorize any of the persons or organizations listed in my application and nomination materials to give all information concerning my previous employment, education, or any other information with regard to any of the subjects covered by this application and nomination, and release all such parties from liability that may result from furnishing such information to you. I authorize you to request and receive such information in consideration for my admission to the program. I agree to abide by the rules and regulations of the program, which may be changed, withdrawn, added or interpreted at any time, at the sole discretion of the Council on Foundations and without prior notice to me.

Completed nomination letter and all application materials must be submitted electronically by March 21, 2012, to [careerpathways@cof.org](mailto:careerpathways@cof.org). Please have recommenders list your name in the subject line (e.g., Pathways' Nomination Form for Jane Doe).

### Inquiries may be directed to:



#### COUNCIL *on* FOUNDATIONS

Career Pathways Pipeline Expansion Program

Attention: Professional Development

2121 Crystal Drive, Suite 700

Arlington, VA 22202

Phone: (703) 879-0600

E-mail: [careerpathways@cof.org](mailto:careerpathways@cof.org)

## Application Checklist

- Completed application
- Completed nomination
- Resume or CV

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

Date: \_\_\_\_\_

## APPLICATION MATERIALS & ESSAY QUESTIONS

Please answer each of the following questions completely and follow all instructions. Type your name and application submission date at the top of each page of your application materials.

### 1. Why Participate in Pathways?

What do you seek to achieve through participation in Pathways? What do you hope to accomplish in your career? Describe your ideal role or job in philanthropy. *Please limit your narrative to no more than 250 words.*

**2. Leadership Qualities**

How would you describe the ideal characteristics of a successful leader? *Please limit your narrative to no more than 200 words.*

**3. Most Significant Volunteer Leadership Experience**

Describe what you consider to be your most significant (non-financial) contribution to your local community and/or to the global community. *Please limit your narrative to 150 words.*

#### 4. Grantmaking Entity

Imagine you have just been notified that you have an opportunity to create a new grantmaking entity with an anonymous gift of \$250M in endowed assets. Begin with a brief mission statement and describe how you would organize your entity.

- ❖ Will you create a traditional foundation?
- ❖ What is your area of funding focus?
- ❖ Who will serve on your board of directors?
- ❖ How will board members be selected?
- ❖ How will grants be awarded?
- ❖ Will the grantmaking entity include staff? (yes/no)
- ❖ If yes, how many?
- ❖ How will you measure the effectiveness of your grantmaking?
- ❖ Explain why this grantmaking entity is needed and the anticipated impact of your work.

*Type or paste your mission statement here (25 words maximum)*

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

Date: \_\_\_\_\_

*Type or paste here how you would organize your entity (please limit your narrative to 750-1,000 words). There are 3 pages allotted. Type or paste the first 350 words on this page, the next 350 words on p.2, and if applicable, the final 300 words on p.3.*

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

**Date:** \_\_\_\_\_

*Grantmaking Entity (p.2).*

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

**Date:** \_\_\_\_\_

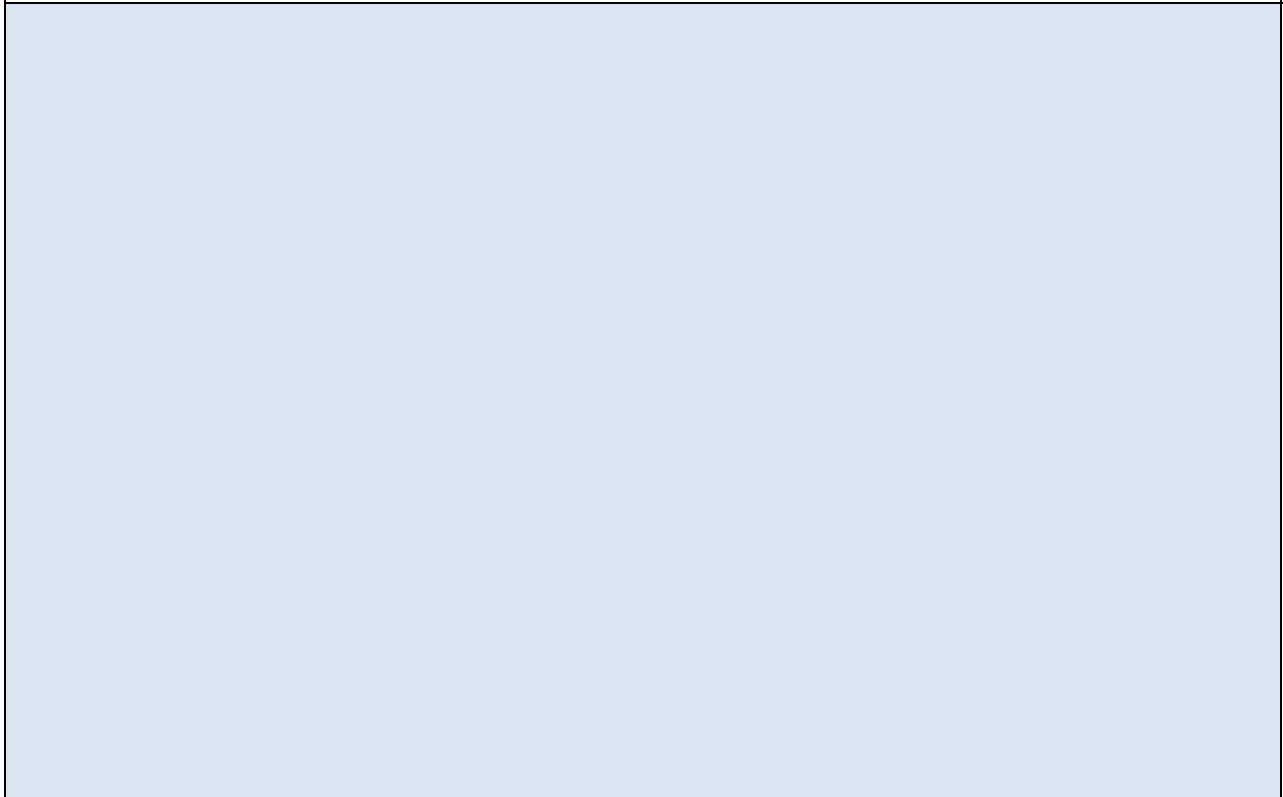
*Grantmaking Entity (p.3.)*

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

Date: \_\_\_\_\_

**5. Reflections on Professional Experience**

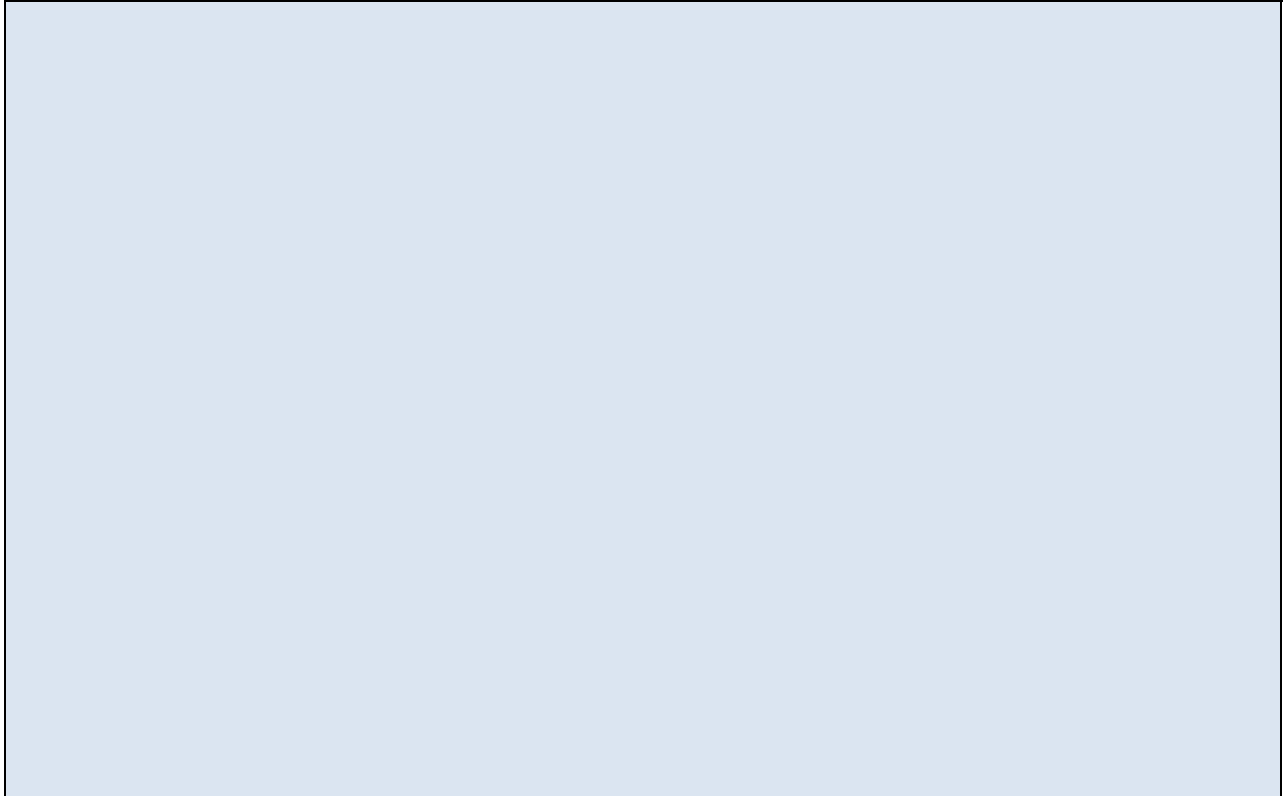
**Part A. [Optional]** If you would like, describe any unique or unusual aspects of your resume or educational history that might not be immediately apparent from a review of your resume. Are there career gaps or nontraditional paths that brought you to philanthropy? This is an optional exercise—if not applicable, move on to Part B. If applicable, *please limit your narrative to 200 words.*



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

Date: \_\_\_\_\_

**Part B.** Describe what you consider to be a significant (positive or negative) professional learning experience. What did you learn from this experience, and how has it changed you professionally? *Please limit your narrative to 200 words.*

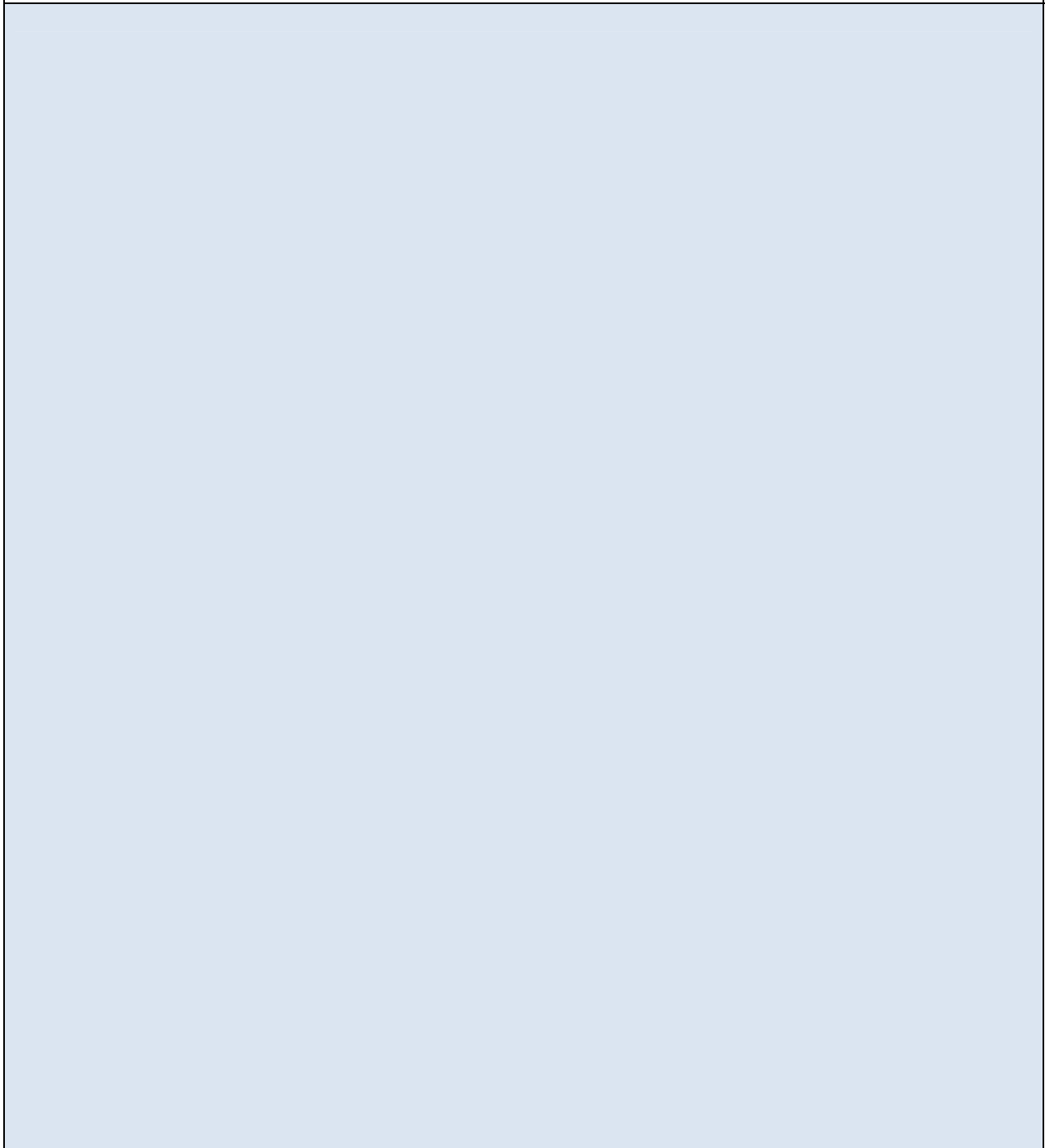


Name: \_\_\_\_\_

Date: \_\_\_\_\_

**6. Professional Experience (p.1)**

Please copy and paste a current resume or CV, which outlines your career and educational experience, community engagement, leadership, volunteerism, and, if applicable, professional affiliations. *The following 5 pages are allotted for your resume/CV. Please ensure that the text of your resume/CV does not truncate.*



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

Date: \_\_\_\_\_

**Professional Experience (p.2)**

*Please paste up to 5 pages and also make sure that pages of your resume/CV do not truncate.*

A large, empty rectangular area with a light blue gradient background, intended for pasting the professional experience section of a resume or CV. The area is bounded by a thin black line.

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

Date: \_\_\_\_\_

**Professional Experience (p.3)**

*Please paste up to 5 pages and also make sure that pages of your resume/CV do not truncate.*

A large, light blue rectangular area intended for pasting professional experience. It occupies the majority of the page below the instructions.

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

Date: \_\_\_\_\_

**Professional Experience (p.4)**

*Please paste up to 5 pages and also make sure that pages of your resume/CV do not truncate.*

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

Date: \_\_\_\_\_

**Professional Experience (p.5)**

*Please paste up to 5 pages and also make sure that pages of your resume/CV do not truncate.*

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