

HACU'S LA ACADEMIA DE LIDERAZGO

Application for Admission/Nomination Form

Please answer all application questions and submit all required materials for review by the Selection Committee. You may complete this application for yourself or nominate someone else. Applications can be completed and sent via email or you can send it regular mail. (*Please type or print legibly*.)

Minimum selection criteria are:

- Professional Experience: At least 10 years of full-time higher education experience.
- Educational Background: Completion of at least a master's degree.
- Supervisory Experience: Currently serving in a director or higher supervisory position or 6 years of previous supervisor experience.

I certify that all the information and accompanying materials provided in connection with this application are authentic and accurate.
NAME OF PERSON COMPLETING THIS APPLICATION:
SIGNATURE OF APPLICANT OR NOMINATOR:
DATE:
GENERAL INFORMATION
NAME OF APPLICANT OR NOMINEE:
CITY: STATE: ZIP: TELEPHONE: FAX:
TELEPHONE: FAX:
GENDER: I identify my gender as:
ETHNIC ORIGIN (check one): ☐ Hispanic/Latino (a) ☐ Black or African American ☐ Native American or American Indian ☐ Asian/Pacific Islander ☐ White/Caucasian ☐ Other (Please specify):
The current institution the applicant/nominee works for is: (Please select one below.)
 ☐ Hispanic-Serving Institution (HSI) – a nonprofit, accredited college, university, or system/district in the U.S. or Puerto Rico, where total Hispanic enrollment constitutes a minimum of 25% of the total enrollment at the undergraduate or graduate level. ☐ Emerging Hispanic-Serving Institution – a nonprofit, accredited college, university, or system/district in the U.S. or Puerto Rico, where total Hispanic enrollment constitutes at least 10% of the total enrollment, or where a minimum of 1,000 Hispanic students are enrolled at the undergraduate or graduate level. ☐ Other (Please specify)

	E (<i>check only highest level o</i> Law □ Ph.D. □ MD	attained): □ BA/BS □ MA/MS □ Other (Please specify)
NAME OF UNIVERSITY A	TTENDED:	
FIELD OF STUDY:		GRADUATION YEAR:
	ositions in reverse chronolog	cical order, starting with the current or most on institution, please give the major FROM (MM/YYYY) TO (MM/YYYY)
† Please include a copy of y	our (or the nominee's) CV the Nominee's) curren	with this application. It responsibilities, including level in the
program. Also des	cribe what you think oth linee's) participation in	ate to you (or the Nominee) attending this ner program participants may learn from this academy (e.g., perspectives, skills,

	What do you anticipate are the next steps in your (or the Nomin progression to a presidential position? (500-word limit)	ence sy care
4.	. How would you characterize your (or the Nominee's) leadership st weaknesses? Provide examples as appropriate. (500-word limit)	trengths an
	What do you believe are the most formidable challenges facing college pre	sidents
	oday? (500-word limit)	
pro Ple	Applicants who are unable to secure funding from their institution to participorogram are eligible for consideration for a fellowship. A few applicants will lease indicate how this fellowship will support you in your career. What make leal candidate for this support?(500-word limit)	be selected.

LETTERS OF REFERENCE INFORMATION

HACU's La Academia de Liderazgo requires that two letters of reference be completed by a senior executive or board member within the institution, or a colleague or former supervisor familiar with the candidate's character, role, and responsibilities, who can provide a detailed firsthand account of the applicant's leadership potential, skills and abilities.

FIRST REFERENCE:
Referring Institution Name:
SECOND REFERENCE:
Referring Institution Name:
*Please include the two letters of reference from the administrators listed above with this application.
BILLING INFORMATION Tuition is \$10,000 per selected participant at a HACU member institution or \$15,000 for participants at nonmember institutions and covers all program materials, HACU conference registrations and selected meals. The invoice will be emailed to the individual indicated below.
NAME:
TITLE OR POSITION:
INSTITUTION NAME:
INSTITUTION ADDRESS: STATE: ZIP:
INSTITUTION TELEPHONE:FAX:
EMAIL:
CANCELLATION POLICY Payment is due within 30 days of the invoice date. Cancellations or deferrals must be submitted in writing at least 30 days prior to the program start date to receive a full refund. Due to program demand and the volume of preprogram preparation, cancellations or deferrals received 14 to 30 days before the program start date are subject to a fee of one-half of the program fee. Requests received within 14 days of the program start date are subject to full payment of the program fee.
program start date are subject to run payment of the program ree.
Upon acceptance, payment is required prior to the program start date.

PLEASE COMPLETE THIS APPLICATION AND SEND IT WITH SUPPORTING DOCUMENTS (CV & 2 Letters of Reference) NO LATER THAN FRIDAY, MARCH 31, 2023 TO:

EMAIL: Applications may be submitted via email to: **leadership@hacu.net**

BY MAIL Dr. Tito Guerrero, III

Director

HACU's La Academia de Liderazgo (The Leadership Academy) Hispanic Association of Colleges and Universities (HACU)

4801 NW Loop 410, Suite 701

San Antonio, TX 78229

For questions about the status of your application or program details, please email leadership@hacu.net or call (210) 576-3222 or (210) 576-3229