



Alexander E. Briseño Leadership Development Program 2010

The Alexander E. Briseño Leadership Development Program (ABLDP) builds and enhances personal and professional leadership skills and promotes civic engagement through service on boards and commissions.

The ABLDP is seven-month program that will give you the skills to succeed in today's business environment. Topics will include Effective Management (conflict, virtual, and engagement), Verbal and Non-verbal Communication, Business Etiquette, The Art of Negotiation, the Meyer Briggs Model, Human Resources Law for Managers, Ethics for Leaders, Building a Leadership Legacy, and Gender/Demographic Diversity. The program provides networking and learning opportunities with existing and emerging civic and corporate leaders in the San Antonio area.

ELIGIBILITY CRITERIA

Applicants must be a member in good standing, or an employee of a member in good standing, of the San Antonio Hispanic Chamber of Commerce (SAHCC). Failure to remain a member in good standing with the SAHCC will subject the applicant to immediate dismissal and forfeiture of graduation. Applicants must also be high school graduates.

APPLICATION PROCESS

Deadline: April 2, 2010

Application must be submitted along with a \$25 non-refundable processing fee. Tuition for the program is \$500 (subject to change). Limited scholarships are available. Please make all checks payable to SAHCC.

Application and processing fee should be mailed to the following address:

For more information contact:

Marisol V. Robles
Vice President of External Affairs
San Antonio Hispanic Chamber of Commerce
318 West Houston Street, Suite 300
San Antonio, Texas 78205



210.225.0462
marisolr@sahcc.org

Extra reference letters, resumes or other information are not necessary.

PERSONAL DATA

Last Name: _____ First Name: _____
Middle Name: _____ Preferred First Name: _____
Date of Birth: _____ Age: _____ Male/Female: _____
Race: _____ Occupation: _____
Home Address: _____
City: _____ State: _____ Zip: _____
Home Telephone: (____) _____ Cell Phone: (____) _____
Years living in City (above): _____ County: _____
Have you previously applied for the Briseño Leadership Development Program (formerly the SA Hispanic Chamber of Commerce Leadership Development Program)?
Yes ___ No ___ If **yes**, what year(s)? _____

HOW DID YOU HEAR ABOUT ABLDP? ABLDP Alumnus Referral ___ SA Express News____
SAHC Email/Website___ SAHCC Employee___ Facebook___

Military Active Duty? Yes ___ No ___ If **yes**, what branch? _____

NOTE: All program information will be mailed to your business address, unless otherwise specified.

Business Address: _____
City: _____ State: _____ Zip: _____
Office Telephone: (____) _____ ext. _____ Fax Number: (____) _____
Email Address: _____
Present Employer/Present Owner: _____
Position/Title: _____ Years of Service/Ownership: _____



EDUCATION

List schools, college, university, etc.; years attended; fields of study; degrees received.

Name and Year

Description

COMMUNITY INVOLVEMENT

List civic, professional, religious and other organizations in which you are currently, or have been, involved. Describe outcome/results of your leadership and participation.

Name and Year

Description

ACCOMPLISHMENTS

Personal awards, honors, appointments, etc.

Name and Year

Description

ESSAY

Write an essay (300 words maximum) in which you state why you want to be selected for the Alexander E. Briseño Leadership Development Program. What do you consider to be your major



qualifications for the program? What do you hope to gain from your participation in the program?

APPLICANT & EMPLOYER AGREEMENT

Applicant Commitment: *The Alexander E. Briseño Leadership Development Program is a six-month program, occurring all day on every second Friday of the month between May and November. Attendance is mandatory at all sessions, including the reception and graduation. Lack of attendance may lead to being dropped from the program without reimbursement. I will abide by the statements as set forth in this program.*

Applicant’s signature (Required): _____

Employer Commitment: An employer must approve and sign the employee agreement below, which acknowledges the time commitment required of a program participant. By signing this document, you acknowledge the foregoing conditions for employee’s participation in the Alexander E. Briseño Leadership Development Program.

Supervisor’s Name (Please Print): _____

Supervisor’s Position: _____

Supervisor’s Signature (Required): _____

Supervisor’s Telephone: (____) _____ **Supervisor’s Email:** _____