



Workforce Leadership Academy Application Preview

CONTACT INFORMATION

1. Contact Information

First name:

Last name:

Job title:

Organization:

Affiliations (*I.e. Board member at Arizona@Work*):

City of residence:

County of service/work (select all that apply):

- ☐ Apache County
- ☐ Cochise County
- ☐ Coconino County
- ☐ Gila County
- ☐ Graham County
- ☐ Greenlee County
- ☐ La Paz County
- ☐ Maricopa County
- ☐ Mohave County
- ☐ Navajo County
- ☐ Pima County
- ☐ Pinal County
- ☐ Santa Cruz County
- ☐ Yavapai County
- ☐ Yuma County

State: AZ

Zip Code of residence:

Phone:

Email:

Organization website URL:

DEMOGRAPHIC INFORMATION

2. Racial/ethnic identity. Select all that apply.

- ☐ American Indian or Alaska Native
- ☐ Asian
- ☐ Black or of African descent
- ☐ Latinx or Hispanic
- ☐ Middle Eastern or North African
- ☐ Native Hawaiian or Pacific Islander
- ☐ White
- ☐ Prefer to Self-Describe: [text box]
- ☐ Prefer Not to Answer

3. Gender identity. Select all that apply.

- ☐ Woman
- ☐ Man
- ☐ Transgender
- ☐ Non-Binary/Third Gender
- ☐ Prefer to Self-Describe: [text box]
- ☐ Prefer Not to Answer

4. What is your age?

- ☐ 18 to 34
- ☐ 35 to 54
- ☐ 55 to 64
- ☐ 65 or older

5. What is the highest degree or level of school that you have completed? If you are currently enrolled, please select the previous grade or highest degree received.

- ☐ Some high school
- ☐ High school diploma or equivalency
- ☐ Some college credits
- ☐ Associate's degree
- ☐ Bachelor's degree
- ☐ Some graduate coursework
- ☐ Master's degree
- ☐ Doctorate
- ☐ Other credentials (please specify): _____

ORGANIZATIONAL BACKGROUND AND DETAILS

4. Which of the following **best** describes your organization?

- ☐ Community-based organization or nonprofit (Note: if you are a workforce development board incorporated as a nonprofit, please check Workforce development board below)
- ☐ Workforce development board

- ☐ Community or technical college
- ☐ Four-year college or university
- ☐ Secondary education
- ☐ Local government (city/county)
- ☐ State government
- ☐ Labor union or labor-management partnership
- ☐ Industry intermediary or sector partnership
- ☐ Professional, business, or industry association, including chambers of commerce
- ☐ Philanthropic organization or funders' collaborative
- ☐ For-profit skills training provider
- ☐ Economic development agency (public agency)
- ☐ Economic development organization (private or nonprofit)
- ☐ Research
- ☐ Other, please describe: _____

5. Does your organization manage the local workforce development board?

- ☐ Yes
- ☐ No

3. How many staff members does your organization employ?

- ☐ 1-10
- ☐ 11-25
- ☐ 26-50
- ☐ 51-75
- ☐ 76-100
- ☐ 101-200
- ☐ Over 200

4. How many staff members do you supervise? _____

5. Does your organization work in or target a specific sector? Select all that apply.

- ☐ This does not apply
- ☐ Aerospace and defense
- ☐ Agriculture and food production
- ☐ Bio-medical
- ☐ Building and construction
- ☐ Education
- ☐ Energy and resilience
- ☐ Film, arts, and media
- ☐ Financial and professional services
- ☐ Forestry and fire safety
- ☐ Government
- ☐ Health care
- ☐ Information technology

- ☐ Leisure and hospitality
- ☐ Manufacturing
- ☐ Mining
- ☐ Retail or wholesale trade
- ☐ Services
- ☐ Transportation, distribution, and logistics
- ☐ Utilities
- ☐ Water and blue economy
- ☐ Other sector (please specify)_____

6. If your organization provides direct services to particular customer groups, what is the **primary** focus of your services?

- ☐ Direct services to job seekers
 - Please indicate any primary job seeker focus, if applicable; e.g., returning citizens, etc.:
- ☐ Direct services to business and industry
- ☐ Worker organizing and worker rights advocacy
- ☐ Other (please describe):
- ☐ Does not apply

7. In which activities is your organization engaged? Check all that apply.

- ☐ Adult basic education, literacy, ESOL, or high school equivalency
- ☐ Skills training; e.g., pre-apprenticeship, certification, customized, etc.
- ☐ Work-based learning; e.g., transitional jobs, on-the-job training, internships
- ☐ Formal apprenticeships
- ☐ Counseling or case management
- ☐ Benefits or work supports; e.g., transportation, child care, housing, etc.
- ☐ Job readiness/job search skills
- ☐ Job matching/Connecting people to employment
- ☐ Youth/young adult education or training
- ☐ Business consulting/technical assistance
- ☐ Capital deployment/investing/lending
- ☐ Community development finance
- ☐ Economic development
- ☐ Employee ownership promotion/support
- ☐ Worker organizing
- ☐ Worker voice and engagement
- ☐ Community organizing
- ☐ Convening of multiple stakeholders
- ☐ Grantmaking/philanthropy
- ☐ Policy advocacy
- ☐ Public policymaking
- ☐ Public administration

- ☐ Research
- ☐ Other (please list): _____

PROFESSIONAL BACKGROUND

8. For how many years have you worked in the workforce development field?
 - ☐ Less than 2 years
 - ☐ More than 2 years, but less than 5 years
 - ☐ More than 5 years, but less than 10 years
 - ☐ More than 10 years
9. Please tell us about your current role and responsibilities. Include how your role is focused on improving opportunity and equity for low-income people. (300 words max)
10. Please state why you entered and are engaged in the workforce development field. Be sure to address what roles you have had in the past and what your future aspirations are. (300 words max)

PERSONAL LEADERSHIP AND GOALS

11. What goals do you have for participating in the Workforce Leadership Academy? Include your personal goals, goals for your organization or program/initiative, and goals for the region's workforce system. (300 words max)
12. The Workforce Leadership Academy is interested in supporting leaders who are open to self-reflection about their own continuing development. In what ways would you like to develop and grow your leadership skills? (300 words max)

PARTNERSHIPS AND COLLABORATION

13. A focus on partnerships and collaboration is a key element of the Workforce Leadership Academy. Provide an example of a current or recent partnership with another organization(s). Describe the goals, your role, what was rewarding, and what was challenging. (300 words max)

ADDITIONAL DOCUMENTATION

14. Organizational chart of your organization or division. The chart should show your supervisors as well as staff reporting to you.

[Upload file]

15. Your resume OR a link to your LinkedIn profile Please choose one of the following options:

- Link to my LinkedIn public profile: *(paste in)*
- Resume attachment

[Upload file]

16. A Letter of Recommendation from either an individual who has direct responsibility for overseeing your work OR from an external partner with whom you work directly. The letter should include the referee's relationship to you, a description of your strengths and achievements, and comments on how you might benefit from and contribute to the Academy.

[Upload file]

17. Review the Commitment to Participate Form thoroughly before signing below.

2027 Southern Arizona Workforce Leadership Academy Commitment to Participate

I understand that the 2027 Southern Arizona Workforce Leadership Academy targets leaders who seek to deepen networks; strengthen systems leadership skills; apply race, equity, and systems change frameworks to leaders' work; deepen understanding of effective strategies and programs; and work collaboratively to identify local and regional systems-based challenges and create shared solutions. The Academy includes both in-person and online activities. Specifically:

Dates & Times	Activities	Location
January 21, 2027 (8:30-10:00 a.m.)	Orientation	Zoom
February 11-12	Opening Retreat <i>(2 days with 1 overnight stay)</i>	In-person (Tucson)
March 2 (8:45 a.m.-12:00 p.m.)	Session 1	Zoom
March 10 (1:15-4:30 p.m.)	CoLab 1	Zoom
April 6 (8:45 a.m.-12:00 p.m.)	Session 2	Zoom
April 14 (1:15-4:30 p.m.)	CoLab 2	Zoom
May 4 (9:30 a.m.-4:00 p.m.)	Session 3 + CoLab 3	In-person (Tucson)
May 18 (1:00-2:00 p.m.)	*PreScheduled CoLab Team Meeting 1	Zoom
May 21 (11:00 a.m.-12:30 p.m.)	LPI 360 Reflection	Zoom
June 15 (8:45 a.m.-12:00 p.m.)	Session 4	Zoom
June 24 (3:00-4:00 p.m.)	*PreScheduled CoLab Team Meeting 2	Zoom
July 14 (3:00-4:30 p.m.)	LPI 360 Reflection	Zoom
August 4 (12:00-6:00 p.m.)	CoLab 4 (12:00- 4:00 p.m.)	In-person (Tucson)

	Mid-Academy Networking Event (4:30-6:00 p.m.)	In-person (Tucson)
August 19 (2:00-3:00 p.m.)	*PreScheduled CoLab Team Meeting 3	Zoom
September 9 (8:45 a.m.-12:00 p.m.)	Session 5	Zoom
September 22 (1:15-4:30 p.m.)	CoLab 5	Zoom
October 14-15	Closing Retreat (<i>2 days with 1 overnight stay</i>)	In-person (Tucson)
November 4 (12:00-7:30 p.m.)	CoLab Stakeholder Event (12:00- 4:30 p.m.)	In-person (Tucson)
	Fellow Celebration Dinner (5:30 p.m.)	In-person (Tucson)
December 2 (9:00 a.m.-12:00 p.m.)	Closing Session	Zoom
January 9, 2028 (10:00–11:00 a.m.)	CFA WLA Network Assembly	Zoom
<i>Ongoing during the academy</i> <i>Continued learning, application, and collaboration between workshop sessions (self-directed time of up to 2 hours between sessions as well as 9 to 12 hours of collaborative project work across a small team of Fellows over the entirety of the academy)</i>		

I understand that while unexpected or emergency situations might necessitate my absence, more than one absence from any session or lab could lead to my withdrawal from the Academy (applicants should confirm their availability for the Opening Retreat before submitting the application).

I also understand the program cost per participant is \$650.00 from the Fellow's organization which assists with meeting costs and program materials. Financial assistance is available on an as-needed basis.

By typing my full name in the application, I agree that if selected for the 2027 Southern Arizona Workforce Leadership Academy, I will commit to full participation in all Academy activities including those listed above. I also commit to engage fully with colleagues across the workforce system, reflect on my practice as a leader, and develop or deepen my strategies.

[Electronic signature]

18. The Authorization to Participate Form must be signed by your Supervisor.

[Upload file]

ADDITIONAL DOCUMENTATION

Letter of Recommendation Example

(Referee Information)

First Name:

Last Name:

Organization:

Title:

Email address:

[letter]

The letter of recommendation for the Academy applicant should include your relationship with the applicant, a description of their strengths and achievements, and comments on how they might benefit from and contribute to the Academy.

Supervisor Authorization to Participate Form

**To be reviewed and signed by the applicant's supervisor, then
uploaded by the applicant. See the next page.**



2027 Southern Arizona Workforce Leadership Academy Authorization to Participate

The 2027 Southern Arizona Workforce Leadership Academy is designed for workforce development professionals who hold a position of influence and responsibility sufficient to develop and lead strategic change initiatives within their organization and in partnership with others in the region.

As Executive Director, Chairman of the Board of Directors, President, or other senior executive responsible for overseeing the work of the applicant, my electronic signature indicates that the applicant holds a level of authority within the organization sufficient to implement a specific initiative or strategy if approved through my organization's internal protocol and policies and is able to initiate or partner with others across the workforce ecosystem.

By typing my full name below, I fully support the applicant's participation in the Workforce Leadership Academy. I understand that, if selected to participate, the applicant will be required to participate in all Academy activities, as listed below. I also understand that, if selected to participate, the applicant will be required to invest additional time to successfully complete the Academy, including time between structured sessions. I confirm that I have reviewed the specific dates for the Academy activities.

Overview of Required Academy Activities for Fellows:

Dates & Times	Activities	Location
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March 10 (1:15-4:30 p.m.)	CoLab 1	Zoom
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Ongoing during Academy

Continued learning, application, and collaboration between workshop sessions (self-directed time of up to 2 hours between sessions as well as 9 to 12 hours of collaborative project work across a small team of Fellows over the entirety of the academy)

I understand that while unexpected or emergency situations might necessitate the Fellow's absence, more than one absence from any session or lab could lead to withdrawal from the Academy (applicants should confirm their availability for the Opening Retreat before submitting the application).

I also understand the program cost per participant is \$650 from the Fellow's organization which assists with meeting costs and program materials. Financial assistance is available on an as-needed basis.

Supervisor Name _____

Supervisor Title and Organization _____

Signature of Supervisor _____

Date _____

