

Hartford Leadership Academy Application

Hartford Leadership Academy is a **10-week investment in you** as a leader, to help you grow as a person and be better able to invest back in your community. The academy will be taking place for 10 weeks on Thursday nights from 5:30-8 pm. The class will start in late March and end in late May. To read more about the Leadership Academy visit sinainc.org/leadershipacademy.

CONTACT INFORMATION

First & Last Name: _____

Current Address: _____ City: Hartford State: CT Zip: _____

Email: _____ Phone Number: _____

SHORT ANSWER QUESTIONS

Please fill out the following questions to the best of your ability.

Why are you applying to the Hartford Leadership Academy?

What are your expectations of the program?

If able, please share an example of something you have done to help improve your community (ex. volunteering, helping with an activity at a school, religious institution, or community organization, reporting a problem to the city, helping a neighbor find a resource, or something else you did on your personal time, etc). There is no wrong answer to this question.

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If you answered the question above, what did you learn about yourself and your community during what you did?

What types of issues and local needs are you passionate about and want to help change as a resident leader?

BACKGROUND QUESTIONS

Please fill out the following questions to help us know you a little bit better.

What do you see as some of the gifts you bring to the class? (check all that apply)

- | | |
|---|--|
| <input type="checkbox"/> People skills - good with people | <input type="checkbox"/> Managing finances |
| <input type="checkbox"/> Good listener | <input type="checkbox"/> Advocacy |
| <input type="checkbox"/> Cooking | <input type="checkbox"/> Music (singing, instrument, other) |
| <input type="checkbox"/> Teaching | <input type="checkbox"/> Art (painting, drawing, etc) |
| <input type="checkbox"/> Community Organizing | <input type="checkbox"/> Good at fixing things (ex. carpentry, cars, plumbing etc) |
| <input type="checkbox"/> Social Media | <input type="checkbox"/> Good with details (planning) |
| <input type="checkbox"/> Passionate | <input type="checkbox"/> Public Speaking |
| <input type="checkbox"/> Coaching | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Good with kids | |
| <input type="checkbox"/> Humor | |

What are you interested in learning about during the class? (check all that apply)

- | | |
|---|--|
| <input type="checkbox"/> Leading a meeting | <input type="checkbox"/> Opportunities to get more involved after the class |
| <input type="checkbox"/> Knowing who to contact to solve a neighborhood issue | <input type="checkbox"/> Nonprofits |
| <input type="checkbox"/> Managing conflict | <input type="checkbox"/> Self-awareness (better understanding of self) |
| <input type="checkbox"/> Public Speaking | <input type="checkbox"/> Growing network with other residents and Hartford leaders |
| <input type="checkbox"/> Advocacy | <input type="checkbox"/> Managing a budget |
| <input type="checkbox"/> Community Organizing | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Leading a group | |
| <input type="checkbox"/> Planning | |

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When is your birthday? (MM/DD/YYYY): _____

What is your gender? (check what applies):

- | | |
|-------------------------------------|--|
| <input type="checkbox"/> Man | <input type="checkbox"/> Prefer not to say |
| <input type="checkbox"/> Woman | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Non-binary | |

What race/ethnicity best describes you? (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Black/ African American | <input type="checkbox"/> Asian/Pacific Islander |
| <input type="checkbox"/> Hispanic/Latino(a) | <input type="checkbox"/> American Indian or Alaskan Native |
| <input type="checkbox"/> White/ Caucasian | |

How did you hear about the program?

- | | |
|---|---|
| <input type="checkbox"/> Social Media | <input type="checkbox"/> Invited by:
_____ |
| <input type="checkbox"/> Flyer/Brochure | <input type="checkbox"/> Other:
_____ |
| <input type="checkbox"/> Website | |

Will you be needing childcare? ___ Yes ___ No

Thank you for filling out this application. You will receive a message within two business days if your application has been received. You will learn if you are accepted into the program within two weeks of applying.

If you have any questions while you are filling out the application, please contact Logan Singerman.

Please Mail or Email this application by Friday, March 1, 2024.

Attn: Logan Singerman
SINA
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Hartford, CT 06106

Logan Singerman
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This opportunity is brought to you by SINA, Inc. and Mutual Housing Association.