



Leadership Lab Application

Name:

Mailing Address:

Phone Number:

Email address:

School District:

Number of board members in your district:

District Enrollment:

County:

Years on School Board:

Appointed or Elected or both:

Does your current term expire in 2018 or 2020?

By checking this box, I agree to attend all 6 sessions (including orientation immediately following Summer Leadership Institute) of Leadership Lab.

I agree.

Tuition and travel assistance:

Please consider me for tuition and travel assistance.

Please briefly describe your philosophy about public education and why it is important to you.

What, if any, other leadership development programs have you participated in and when?



What do you hope to gain from participating in the ASBA Leadership Lab?

What leadership skills do you hope to gain and/or improve?

What public education issues do you view as relevant and needing change?

Does working in teams suit your personality and how do you see yourself fitting into a team?



Change in any spectrum requires working within both political and legislative systems. How comfortable are you in political or legislative advocacy? What skills would help you to be comfortable in that space?

Building leadership capacity requires the ability to make connections within areas of expertise. How comfortable are you with networking and how have you been able to build a network in your current role?

How would you like to use the tools and skills you learn in Leadership Lab to improve or change public education in Arizona?