



INSTRUCTIONS FOR SUBMISSION OF APPLICATION

One copy of this application and your current resume must be emailed, postmarked or submitted in person by **Friday, October 28, 2011**.

Illinois Lincoln Excellence in Public Service Series
JoEllen Ridder , Executive Director
322 Gloria Jean Dr.
Bensenville, IL 60106
governors@lincolnseries.com

The application must be completed in full. Applications that are incomplete or are postmarked, dropped off or emailed after the due date are not eligible. Do not include materials other than those requested in this package. Should additional references or information be required, you will be contacted and asked to submit them. **PLEASE CAREFULLY REVIEW THE LINCOLN SERIES TIME COMMITMENTS.**

If you are chosen as a Lincoln Excellence Series finalist, you must be available for a personal interview on Saturday, **November 05 or 12, 2011**. You will be notified of the specific date and location. At the time of the interview, you must provide proof that you voted in the 2008 and 2010 Republican primary elections. The documentation is available from your county clerk or local election commission. At the interview we will provide you with a calendar identifying the dates of the 2012 class sessions.

All information is confidential. The selection committee reserves the right to choose program participants based upon the basic selection criteria. Primary weight will be given to candidates the selection committee believes will be most likely to utilize their leadership and commitment to public service.

If you are awarded a Lincoln Excellence Series Fellowship, you must provide the following items within 30 days of receiving notice.

1. Formal letter of acceptance
2. *A photograph, portrait style, no larger than 5 x 7 (electronic format preferred)
3. *A short paragraph style biography suitable for publishing on our website
4. A letter from your employer approving your time off from work
5. A check for \$500.00 payable to the Illinois Lincoln Series for administrative costs. (Sponsorships by third parties are acceptable.)
6. *A copy of your driver's license.

*Your photograph and biography will be posted on the Lincoln Series Website, www.lincolnseries.com. Your driver's license will be used to book the airline ticket for the Washington D.C. program.

Lincoln Series Fellows are responsible for travel and lodging costs for most in-state seminar locations. Travel expenses are tax deductible as permitted by law.



PARTICIPANT RESPONSIBILITIES ILLINOIS LINCOLN EXCELLENCE IN PUBLIC SERVICE

Participant is expected to:

1. Attend all scheduled classes and commit entire day(s) to class. Graduation from the program is dependent on attendance. Excused absences for personal emergencies only. Two absences will result in dismissal. Any excused absence will require volunteer time on a campaign for the hours missed.
2. Provide verified written permission from employer (if applicable) for attendance at scheduled Lincoln Series programs.
3. Pay the \$500.00 registration fee, due within 30 days of acceptance of participation in the program. (Sponsorships are acceptable from third parties)
4. Honor the confidentiality of all information shared during the class sessions.
5. Commit to increase your level of participation in the political arena during the next 5 years by: running for office, accepting a party leadership post, obtaining a governmental appointment, working or running a campaign to help elect Republicans, or holding other high-level public sector policy positions.
6. Raise \$1000 in in-kind sponsorships or donations.
7. Prepare and send thank you notes to monthly program speakers (as designated) within 10 days of completion of a program.

Signed _____

Dated _____

PUBLICITY RELEASE

I _____ give my permission to use both my name and photograph in any publicity or press release with respect to the Illinois Lincoln Excellence in Public Service Series which the Board of Governor's deems appropriate. I agree to provide a photograph (head) of myself and a short biography to be used on the website within 30 days of receipt of the letter of acceptance to the Illinois Lincoln Series.

Signed _____



APPLICATION FOR FELLOWSHIP

NAME: Ms. Mrs. Miss			
<small>(circle one)</small>	First	Middle Initial	Last Name

NICKNAME (Name Known)	
Date of Birth (MM/DD/YY):	

HOME ADDRESS:	
PHONE:	
EMAIL:	
FAX:	
CELL:	
*	

BUSINESS/ORGANIZATION:	
TITLE (If Applicable):	
BUSINESS ADDRESS:	
PHONE:	
EMAIL:	
FAX:	
CELL:	
*	

*Please check the mailing and email address to which you prefer to have information sent.

<p>322 GLORIA JEAN DR. • BENSENVILLE • ILLINOIS • 60106 PHONE: 630-715-7853 WEBSITE: WWW.LINCOLNSERIES.COM Email: governors@lincolnseries.com</p>
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BACKGROUND DATA

PROFESSIONAL ORGANIZATIONS:

Please list all organizations you presently belong to or have belonged to in the past, and indicate any leadership positions held, together with dates of membership.

VOLUNTEER/COMMUNITY ACTIVITIES:

Please list community, civic, professional, political, business, cultural, religious, social, athletic, etc., organizations to which you have volunteered your time and for which you have not received monetary compensation. Please indicate how you assisted the organization and for how long.

Special Honors/Awards/ Leadership Activity/Other Achievements:

Please list the year the achievement was recognized, and specify the significance of the award as related to this application.



BACKGROUND DATA

In your career, what do you consider to be your most outstanding achievements (personal, political, career)?
Briefly tell us about women who are your role models and why.
Did you vote Republican in the last primary?
List the Following: County/Township/ Ward where you vote: Your Congressional District: Your State Senate District: Your Legislative District: Name and address of your <u>Republican County Chair</u>:
Name and address of your Republican State Central Committeeman:
How did you first learn about the Illinois Excellence in Public Service Series?



In your own words, please tell us why you feel you should be selected as a Fellow, what you can offer the political system, what you can offer the future of our state and country, and how you would help advance women in the Republican Party and in government. (Attach a one-page statement.)

CLOSING STATEMENT

I understand that if accepted into the Illinois Lincoln Excellence in Public Service Series, my attendance is mandatory at all sessions, except in case of emergency.

Signed _____

Date _____

The following two pages are forms for your letters of recommendation. You may include them in your packet, OR, they may be mailed (emailed) direct to the Illinois Lincoln Series. It is your responsibility to make sure the letters are received on time.



CAREER/ACTIVITIES REFERENCE INFORMATION

To be considered as a candidate for the Excellence in Public Service Series, you must have a reference by a business/professional/community associate in a management capacity that is familiar with your work.

TO BE COMPLETED BY YOUR SPONSOR:

I hereby recommend _____ as a candidate for the Excellence in Public Service Series for the year 2012. I am not related to the nominee.

NOTE: If more space is needed, please continue on an additional page.

Please explain why you feel the person you are referring should be considered for the Series.

Please explain how you know the nominee and why you are referring this candidate.

Signature: _____

Name:			
Address:			
Title (If Applicable):			
Phone:		Fax:	
Email:			

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REPUBLICAN PARTY REFERENCE INFORMATION

To be considered as a candidate for the Excellence in Public Service Series, a fellow Republican must sponsor you.

TO BE COMPLETED BY YOUR SPONSOR:

I hereby recommend _____ as a candidate for the Excellence in Public Service Series for the year 2012. I am a member of the Republican Party in good standing and am not related to the nominee.

NOTE: If more space is needed, please continue on an additional page.

Please explain why you feel the person you are referring should be considered for the Series.

Please explain how you know the nominee and why you are referring this candidate.

Signature:

Name:			
Address:			
Title (If Applicable):			
Phone:		Fax:	
Email:			

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