## Oklahoma Executive Fire Officer Leadership Program Admissions Application

| 1. NAME (Last, First, Middle Initial, Suffix)  |  |  | 2. DATE OF BIRTH (MM/DD/YYYY) |                   |  |
|--|--|--|-------------------------------|-------------------|--|
|  |  |  |                               |                   |  |
| 3. HOME MAILING ADDRESS  |  | 4. WORK PHON   | IE NUMBER:                    |                   |  |
| S. HOME INVILLING ADDITES  |  | 5. HOME PHONE NUMBER:                                |                               |                   |  |
|  |  | 6. CELL PHONE NUMBER:                                |                               |                   |  |
|  |  | 7. FAX NUMBER  | ₹:                            |                   |  |
|  |  | 8. E-MAIL ADDRESS:                                   |                               |                   |  |
| 9. NAME AND ADDRESS OF ORGANIZATION  |  | 10. CURRENT POSITION AND NUMBER OF YEARS IN POSITION |                               |                   |  |
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| 11. JURISDICTION   |  |  |                               |                   |  |
| STATEWIDE  | SPECIAL DISTRICT/TOWNSHIP  |  | FOREIGN                       | OTHER:            |  |
| COUNTY GOVERNMENT  | FEDERAL/MILITARY   |  | DHS/FEMA                      |                   |  |
| CITY/TOWN/VILLAGE  | INDUSTRY/BUISNESS  |  | TRIBAL NATION                 |                   |  |
| 12. Organization   | 13. CURRENT STATUS   | 14. GENDER   | 15. E                         | THNICITY          |  |
| ALL CAREER   | PAID FULL TIME   |  | MALE                          | HISPANIC          |  |
| ALL VOLUNTEER  | PAID PART TIME   |  | FEMALE                        | OR LATINO         |  |
| COMBINATION  | VOLUNTEER  |  |                               | NOT HISPANIC      |  |
| 16. RACE   |  |  |                               | OR LATINO         |  |
| AMERICAN INDIAN  | ASIAN BLACK OR   | WHITE  | NATIVE HAWAIIAN               | OTHER:            |  |
| OR ALASKAN NATIVE  | AFRICAN AMERICAN   |  | OR PACIFIC ISLANDER           | 3                 |  |
| 17a. I certify that the information recorded on t  | this application is correct. Falsification of inform   | ation will result                                    | in denial of acceptance       | ce.               |  |
|  | all information concerning my enrollment in this   | program to the                                       | chief officer in charge       | , designee, of my |  |
| organization. All requests for information shall   |  |  |                               |                   |  |
| - '  | regulations of OSU, OSU-FST, Oklahoma Fire Chi<br>ent application, expulsion from the program, and |  | _                             | =                 |  |
| SIGNATURE OF APPLICANT   |  |  | DATE                          |                   |  |
|  |  |  |                               |                   |  |
| OKEFOLD will not discriminate on the basis of a  | <b>EQUAL OPPORTUNITY ST.</b> ge, gender, race, color, religious belief, national                   |  | intation or disability i      | n the admission   |  |
| and student related procedures. OKEFOLP will   | make every effort to ensure equitable represent  | •  | •                             |                   |  |
| Qualified minority and women candidates are $\epsilon$   | encouraged to apply.  PRIVACY ACT STATE  | <i>NENT</i>  |                               |                   |  |
| GENERAL - This information is provided pursual for individuals applying for admission to OKEFC   | nt to Public Law 93-579 (Prvacy Act of 1974), Tit<br>DLP.  | e 5 United State                                     | es Code (U.S.C.) Sectio       | n 552a,           |  |
| PURPOSES - To determine eligibility for participation in OKEFOLP. Information such as age, gender, and ancestrial heritage are used for statistical purposes only. |  |  |                               |                   |  |
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| SECTION I - GENERAL INFO   | DPMATION                                   |
| 1. Please describe your organization fully in terms of functions or service provided. (Attach add  |  |
| 2. Thease describe your organization rany in terms of farietions of service provided. (Attach add  | ntonui pages us necaeu,                    |
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| 2. Please describe your specific duties and responsibilities within the organization at an officer | level. (Attach additional pages as needed) |
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| SECTION II - BRIEF ESSAY QUESTIONS  |  |
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| 3. Describe your most substantial professional achievement and explain why you view it as such. (Attach additional pages as needed)   |  |
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| 4. What goals do you expect to realize by paricipating in the Oklahoma Executive Fire Officer Leadership Program and how might achieving those goals  |  |
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|  | experience, and capabilities will contribute to the Program and to your fellow participants. |              |
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| (Attach additional pages as needed)  |  |              |
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| 6. Please descibe briefly the two most ch  | allenging management problems facing you on your job, explaining how they affect attain      | ment of your |
|  | rallenging management problems facing you on your job, explaining how they affect attain     | ment of your |
| 6. Please descibe briefly the two most cha<br>organization goals. (Attach additional pag |  | ment of your |
|  |  | ment of your |

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| Admissions Application   |
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| APPLICATION REQUIREMENT CHECKLIST                                      |
| COMPLETED APPLICATION WITH ADDITIONAL PAGES ATTACHED                   |
| 10 YEARS IN THE FIRE SERVICE OR FIRE RELATED ORGANIZATION              |
| 3 YEARS AS AN OFFICER  |
| RESUME   |
| 2-3 PAGE LETTER STATING WHY YOU SHOULD BE CHOSEN                       |
| LETTER OF COMMITMENT FROM YOUR ORGANIZATION                            |
| LETTER OF RECOMMENDATION FROM YOUR CITY MANAGER, CHIEF, OR OFFICER     |
| LETTER OF RECOMMENDATION FROM A COMMUNITY LEADER WITHIN YOUR COMMUNITY |
|  |
| MAIL COMPLETED APPLICATION TO:   |
| Oklahoma EFOLP   |
| Attn: Jason Louthan  |
| 1723 W. Tyler  |
| Stillwater, OK 74078   |
|  |

