

CONFIDENTIAL: The information you provide below is for use by the Admissions Committee only.

ORGANIZATION

YOUR ULTIMATE PARENT COMPANY	YOUR COMPANY/DIVISION
Products/Services: _____	_____
Annual Sales Volume (in U.S. dollars): \$ <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/>
Number of Employees: _____	_____
How many reporting levels are above you, including the chief executive officer of the parent company? _____	
What is the title of the person to whom you report? _____	
Please describe your organizational hierarchy or provide an organizational chart. _____	

PLEASE CHECK YOUR CURRENT INDUSTRY (check one only):

Manufacturing

- Aerospace/Automotive/Transportation Equipment
- Agriculture, Food, and Beverage
- Biotechnology
- Chemicals
- Consumer Products
- Energy/Extractive Minerals
- Heavy Capital Intensive/Raw Materials Suppliers
- High Technology/Electronics
- Highly Diversified Manufacturing and Nonmanufacturing
- Machinery and Equipment Manufacturers
- Medical/Healthcare Devices
- Paper and Forest Products
- Pharmaceuticals
- Software
- Textiles
- Other Manufacturing
specify: _____

Nonmanufacturing

- Accounting
- Advertising
- Advocacy/Legal Services
- Broadcasting
- Commercial Banking
- Computer-Related Services
- Construction
- Consulting
- Education
- Engineering
- Entertainment/Leisure
- Environmental Conservation
- Food Service/Lodging
- Foundation/Grantmaking
- General Government
- Health Services
- Housing and Urban Development
- Insurance and Diversified Financials
- Investment Banking/Brokerage

- Investment Management
- Military
- Printing/Publishing
- Real Estate
- Retailing/Wholesaling
- Social Services
- Telecommunications
- Trading
- Transportation
- Utilities
- Other Communications
specify: _____
- Other Nonprofit
specify: _____
- Other Services
specify: _____

WHAT FUNCTION BEST DESCRIBES YOUR POSITION? (check one only):

- Accounting/Control
- Engineering
- Finance
- Fundraising
- General Management
- Human Resources
- Information Services
- Law
- Logistics
- Manufacturing/Operations
- Marketing
- Medicine
- Planning
- Product Development
- Project Management
- Public Relations
- Purchasing
- Religion
- Research & Development
- Sales
- Teaching
- Other
specify: _____

ANNUAL COMPENSATION (INCLUDING BONUS) IN U.S. DOLLARS (check one only):

- <\$100,000
- \$101,000–\$150,000
- \$151,000–\$200,000
- \$201,000–\$300,000
- \$301,000–\$500,000
- >\$500,000

WORK EXPERIENCE

Please list your positions in reverse chronological order, starting with your current one. If all positions are in the same company, please give the major promotional sequence.

NAME OF COMPANY	TITLE OR POSITION	FROM <i>Month/Year</i>	TO <i>Month/Year</i>
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PLEASE ESTIMATE YOUR TOTAL YEARS OF PROFESSIONAL EXPERIENCE: _____

PLEASE DESCRIBE YOUR CURRENT RESPONSIBILITIES, INCLUDING YOUR LEVEL IN THE ORGANIZATION.

IN A ONE-PARAGRAPH EXECUTIVE SUMMARY, PLEASE DESCRIBE YOUR OWN LEADERSHIP CHALLENGE(S) ESPECIALLY IN RELATION TO YOUR ROLE AS A LEADER.

PLEASE DESCRIBE YOUR LEADERSHIP STYLE AND APPROACH.

WHY DO YOU BELIEVE THAT YOU HAVE BEEN DESIGNATED AS A LEADER WITHIN YOUR ORGANIZATION?

PLEASE EXPLAIN YOUR OBJECTIVES AND GOALS AS THEY RELATE TO ATTENDING THIS PROGRAM. ALSO DESCRIBE WHAT YOU THINK OTHER PROGRAM PARTICIPANTS MAY LEARN FROM YOU (E.G., PERSPECTIVES, SKILLS, EXPERTISE).

EDUCATION

DEGREE (*check only highest level attained*): High School Two-Year College BS/BA MS/MA MBA Harvard MBA JD/Law PhD MD Foreign Diploma Other

UNIVERSITY: _____ YEAR: _____

HAVE YOU ATTENDED OTHER HARVARD BUSINESS SCHOOL PROGRAMS?

PROGRAM NAME	DATE
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HOW DID YOU LEARN ABOUT THIS PROGRAM?

Direct mail package HBS Executive Education website Online advertisement Social media
 HBS email notification Internet search Print advertisement Other (*specify*): _____

WHAT FACTOR HAD THE MOST INFLUENCE ON YOUR DECISION TO APPLY TO THIS PROGRAM?

- A previous participant in an HBS Executive Education program An MBA graduate of HBS Human resource department
- Participant Name _____ Division Head or Manager Other (specify): _____
- Program/Year _____ HBS faculty _____
- HBS Executive Education Corporate Relations

IF YOU SAW A PRINT ADVERTISEMENT, PLEASE SPECIFY WHERE:

- BusinessWeek Harvard Business Review strategy+business Other (specify): _____
- The Economist The New Yorker

IF YOU SAW AN ONLINE ADVERTISEMENT, PLEASE SPECIFY WHERE:

- BusinessWeek Financial Times LinkedIn The Wall Street Journal
- The Economist Harvard Business Online strategy+business Other (specify): _____

CANCELLATION POLICY

Payment is due within 30 days of the invoice date. Cancellations or deferrals must be submitted in writing more than 30 days before the program start date to receive a full refund. Due to program demand and the volume of preprogram preparation, cancellations or deferrals received 14 to 30 days before the program start date are subject to a fee of one-half of the program fee. Requests received within 14 days of the program start date are subject to full payment of the program fee.

Upon acceptance, payment is required prior to the program start date.

SIGNATURE OF APPLICANT: _____ DATE: _____

I certify that all the information and accompanying material provided in connection with this application are authentic and accurate.

SPONSORING INFORMATION

If you are applying for *High Potentials Leadership Program* or *Leadership Reflections and Insights*, your application must be accompanied by a separate Sponsoring Statement from a senior corporate executive. If you are applying for *Leadership Best Practices* or *Leadership for Senior Executives*, please have a senior executive from your organization complete the following:

NAME OF ORGANIZATION: _____

nominates this leader for the _____ program(s).
It is understood that this executive, if admitted, will be completely free of official duties while participating in the program. It is also understood that this executive is proficient in fast-paced, conversational English.

SIGNATURE OF SPONSORING EXECUTIVE: _____ DATE: _____

NAME: _____
Last (family) First Middle Initial Prefix (Mr., Ms.) Suffix (Jr., II)

TITLE OR POSITION: _____

ADDRESS: _____
(P.O. boxes accepted outside U.S.) Street City State/Country Zip Code/Postal Code

TELEPHONE: _____ FAX: _____ EMAIL: _____

BILLING INFORMATION

An invoice will be emailed to the individual indicated below.

NAME: _____
Last (family) First Middle Initial Prefix (Mr., Ms.) Suffix (Jr., II)

TITLE OR POSITION: _____

COMPANY/ORGANIZATION NAME: _____

COMPANY/ORGANIZATION ADDRESS: _____
(P.O. boxes accepted outside U.S.) Street City State/Country Zip Code/Postal Code

TELEPHONE: _____ FAX: _____ EMAIL: _____

In accordance with Harvard University policy, Harvard Business School does not discriminate against any person on the basis of race, color, sex or sexual orientation, gender identity, religion, age, national or ethnic origin, political beliefs, veteran status, or disability in admission to, access to, treatment in, or employment in its programs and activities.

LEADERSHIP PROGRAMS



THE LEADERSHIP INITIATIVE AT HARVARD BUSINESS SCHOOL

SPONSORING STATEMENT

PLEASE INDICATE THE PROGRAM(S) FOR WHICH YOU ARE APPLYING:

- High Potentials Leadership Program Leadership Reflections and Insights

Please type or print legibly.

NAME OF APPLICANT:

Last (family)

First

Middle Initial

Prefix (Mr., Ms.)

Suffix (Jr., II)

ORGANIZATION:

This statement should be completed by a senior executive of the organization who is thoroughly familiar with the candidate and can provide a detailed, firsthand appraisal. The candidate's application will not be acted upon until the individual application and Sponsoring Statement have been received.

These documents may be sent directly to the Admissions Committee for the program or, if appropriate, may be sent together with the candidates application.

In accordance with Harvard University policy, Harvard Business School does not discriminate against any person on the basis of race, color, sex or sexual orientation, gender identity, religion, age, national or ethnic origin, political beliefs, veteran status, or disability in admission to, access to, treatment in, or employment in its programs and activities.

SIGNATURE OF SPONSORING EXECUTIVE:

DATE:

NAME:

Last (family)

First

Middle Initial

Prefix (Mr., Ms.)

Suffix (Jr., II)

TITLE OR POSITION:

ADDRESS:

(P.O. boxes accepted outside U.S.)

Street

City

State/Country

Zip Code/Postal Code

TELEPHONE:

FAX:

EMAIL:

PLEASE RETURN THIS SPONSORING STATEMENT:

BY MAIL:

ADMISSIONS COMMITTEE

Leadership Programs

Harvard Business School

Soldiers Field

Boston, MA 02163-9986 U.S.

ONLINE:

Applications may be submitted

online at: www.exed.hbs.edu

BY FAX:

ADMISSIONS COMMITTEE

Leadership Programs

Fax: +1-617-496-1731

For questions on the status of your submitted sponsoring statement, please call +1-617-495-6226.

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PLEASE DESCRIBE YOUR OBJECTIVES IN NOMINATING THIS INDIVIDUAL FOR THIS PROGRAM.

HAVE YOU DISCUSSED THESE OBJECTIVES WITH THE CANDIDATE?

HOW WOULD YOU EVALUATE THE APPLICANT'S STRENGTHS AND WEAKNESSES AS A LEADER?

HOW ARE LEADERSHIP DEVELOPMENT CANDIDATES IDENTIFIED WITHIN YOUR ORGANIZATION? WHAT CRITERIA DO YOU USE?

PLEASE NOTE:

- It is understood that participants will be completely free of official duties while members of the program and will not be asked to be absent from the program except for emergencies.
- Your candidate's application will not be acted upon until the individual application and Sponsoring Statement have been received.
- Payment is due within 30 days of the invoice date. Cancellations or deferrals must be submitted in writing more than 30 days before the program start date to receive a full refund. Due to program demand and the volume of preprogram preparation, cancellations or deferrals received 14 to 30 days before the program start date are subject to a fee of one-half of the program fee. Requests received within 14 days of the program start date are subject to full payment of the program fee.

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DATE: _____