

PROGRAM FOR LEADERSHIP DEVELOPMENT

APPLICATION FOR ADMISSION

PLEASE SPECIFY SESSION DATE: _____

- Please answer all questions. This application must be fully completed and signed, and the Sponsoring Statement must be received, before review by the Admissions Committee.
- Please have your sponsoring executive complete the enclosed Sponsoring Statement. This document may be sent directly from the sponsoring official to the Admissions Committee or, if appropriate, may be sent together with the application.
- This is a writeable PDF. You may type directly on this form, or print it and complete it by hand. *Please type or print legibly.*

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

SIGNATURE OF APPLICANT: _____

DATE: _____

NOTE: You must use [Acrobat Reader 9.0](#) or higher to complete, save, and send this form electronically.

GENERAL INFORMATION

NAME:

Last (family)

First

Middle Initial

Prefix (Mr., Ms.)

Suffix (Jr., II)

NICKNAME/FAMILIAR NAME FOR NAME BADGE: _____

MALE

FEMALE

COUNTRY OF CITIZENSHIP: _____

DATE OF BIRTH: _____

Month/Day/Year

TITLE OR POSITION: _____

DIVISION *(if applicable)*: _____

COMPANY/ORGANIZATION NAME: _____

COMPANY/ORGANIZATION ADDRESS:

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

Street

City

State/Country

Zip Code/Postal Code

COMPANY/ORGANIZATION TELEPHONE: _____

FAX: _____

COMPANY/ORGANIZATION WEBSITE: _____

EMAIL: _____

ULTIMATE PARENT COMPANY: _____

YOUR HOME ADDRESS: _____

Street

City

State/Country

Zip Code/Postal Code

HOME TELEPHONE: _____

MOBILE TELEPHONE: _____

PREFERRED MAILING ADDRESS: _____

BUSINESS ADDRESS

HOME ADDRESS

LANGUAGE PROFICIENCY

Proficiency in spoken and written English is essential for active participation in the fast-moving classes and small group discussions. If English is your second language, or if you have less than one year's experience working in an English-speaking environment, please provide a brief statement documenting your proficiency. *(The Admissions Committee also may require an interview.)*

PLEASE RETURN THIS APPLICATION:

ONLINE:

Applications may be submitted online at: www.exed.hbs.edu

EMAIL:

Applications may be submitted via email to: exed_admissions@hbs.edu

BY MAIL:

ADMISSIONS COMMITTEE
Program for Leadership Development
Harvard Business School
Soldiers Field
Boston, MA 02163-9986 U.S.

BY FAX:

ADMISSIONS COMMITTEE
Program for Leadership Development
Fax: +1-617-496-1731

For questions on the status of your submitted application, please email exed_admissions@hbs.edu or call +1-617-495-6226.



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 \$ <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"/> <i>(in U.S. dollars):</i>	\$ <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 employees are under your direct supervision? _____	
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):*

- | | | |
|--|--|--|
| <input type="checkbox"/> Agriculture | <input type="checkbox"/> Entertainment | <input type="checkbox"/> Professional Services |
| <input type="checkbox"/> Apparel | <input type="checkbox"/> Environmental | <input type="checkbox"/> Raw Materials |
| <input type="checkbox"/> Banking | <input type="checkbox"/> Finance | <input type="checkbox"/> Real Estate |
| <input type="checkbox"/> Biotechnology | <input type="checkbox"/> Food & Beverage | <input type="checkbox"/> Recreation |
| <input type="checkbox"/> Chemicals | <input type="checkbox"/> Government | <input type="checkbox"/> Retail |
| <input type="checkbox"/> Communications | <input type="checkbox"/> Health Care | <input type="checkbox"/> Shipping |
| <input type="checkbox"/> Construction | <input type="checkbox"/> Hospitality | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Consulting | <input type="checkbox"/> Insurance | <input type="checkbox"/> Telecommunications |
| <input type="checkbox"/> Consumer Products | <input type="checkbox"/> Machinery | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Education | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Utilities |
| <input type="checkbox"/> Electronics | <input type="checkbox"/> Media | <input type="checkbox"/> Other |
| <input type="checkbox"/> Energy | <input type="checkbox"/> Not For Profit | <i>specify:</i> _____ |
| <input type="checkbox"/> Engineering | <input type="checkbox"/> Pharmaceuticals | |

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

- | | | |
|---|---|---|
| <input type="checkbox"/> Accounting/Control | <input type="checkbox"/> Logistics | <input type="checkbox"/> Purchasing |
| <input type="checkbox"/> Engineering | <input type="checkbox"/> Manufacturing/Operations | <input type="checkbox"/> Religion |
| <input type="checkbox"/> Finance | <input type="checkbox"/> Marketing | <input type="checkbox"/> Research & Development |
| <input type="checkbox"/> Fundraising | <input type="checkbox"/> Medicine | <input type="checkbox"/> Sales |
| <input type="checkbox"/> General Management | <input type="checkbox"/> Planning | <input type="checkbox"/> Teaching |
| <input type="checkbox"/> Human Resources | <input type="checkbox"/> Product Development | <input type="checkbox"/> Other |
| <input type="checkbox"/> Information Services | <input type="checkbox"/> Project Management | <i>specify:</i> _____ |
| <input type="checkbox"/> Law | <input type="checkbox"/> Public Relations | |

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

- | | | |
|--|--|--|
| <input type="checkbox"/> <\$100,000 | <input type="checkbox"/> \$151,000–\$200,000 | <input type="checkbox"/> \$301,000–\$500,000 |
| <input type="checkbox"/> \$101,000–\$150,000 | <input type="checkbox"/> \$201,000–\$300,000 | <input type="checkbox"/> >\$500,000 |

WORK EXPERIENCE

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

NAME OF COMPANY	TITLE OR POSITION	FROM (MM/YYYY)	TO (MM/YYYY or CURRENT <i>if employed</i>)
-----------------	-------------------	----------------	---

PLEASE ESTIMATE YOUR TOTAL YEARS OF PROFESSIONAL EXPERIENCE: _____

Please continue your responses on the back cover or attach a separate statement if necessary.

PLEASE PROVIDE A BRIEF DESCRIPTION OF YOUR ORGANIZATION AND/OR BUSINESS UNIT.

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

WHAT OBJECTIVES DO YOU HOPE TO ACHIEVE BY ATTENDING THIS PROGRAM?

WHAT DO YOU ANTICIPATE YOUR CAREER PROGRESSION WILL BE WITHIN YOUR COMPANY IN THE NEXT FIVE YEARS?

HOW WOULD YOU CHARACTERIZE YOUR LEADERSHIP STRENGTHS AND WEAKNESSES? PROVIDE EXAMPLES AS APPROPRIATE.

WHAT ARE THE MOST FORMIDABLE CHALLENGES FACING YOUR ORGANIZATION AND/OR BUSINESS UNIT?

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 _____

Please indicate, by putting an "X" in the appropriate box, the amount of prior experience and familiarity you have with each of the following areas or activities.

	STRONG <i>Major job responsibility and/or formal academic training</i>	MODERATE <i>Working familiarity</i>	LITTLE OR NONE <i>Unfamiliar</i>
General Management:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Accounting and Control:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Marketing:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Finance and Financial Analysis:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Human Resource Management:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Production or Operations:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Information Technology:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other Expertise <i>(please describe):</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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:

Financial Times HBS Alumni Bulletin strategy+business
 Harvard Business Review MIT Sloan Management Review Other (*specify*): _____

IF YOU SAW AN ONLINE ADVERTISEMENT, PLEASE SPECIFY WHERE:

Bloomberg Business LinkedIn strategy+business
 Business Insider Quartz USA Today
 Harvard Business Review Reuters 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.

I have read the cancellation policy and agree to the terms stated. *(please initial here)* _____

SPONSORING INFORMATION

Harvard Business School Executive Education requires that a senior executive within the organization sponsor the applicant. (Please note that the sponsor must be someone other than the applicant.) Your application must be accompanied by a Sponsoring Statement.

SPONSORING COMPANY/ORGANIZATION NAME: _____

NAME:

Last (family)

First

Middle Initial

Prefix (Mr., Ms.)

Suffi (Jr., II)

TITLE OR POSITION: _____

EMAIL: _____

BILLING INFORMATION

An invoice will be emailed to the individual indicated below.

NAME:

Last (family)

First

Middle Initial

Prefix (Mr., Ms.)

Suffi (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: _____

Harvard Business School is governed by a set of community values that foster honesty, respect for others, and accountability for one's actions. Harvard Business School considers these values essential for a safe and productive learning environment for all.

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.

Harvard Business School may disclose, without consent, "directory" information about students. However, under the Family Educational Rights and Privacy Act (FERPA), participants may request that the School not disclose directory information about them.

Your FERPA rights are available at: <http://www.exed.bbs.edu/Documents/ferpa.pdf>. Please contact Enrollment and Admissions Services at exed_admissions@bbs.edu, if you have concerns or wish to discuss your rights under FERPA.

PROGRAM FOR LEADERSHIP DEVELOPMENT

SPONSORING STATEMENT

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DATE: _____

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NAME OF APPLICANT: _____

Last (family)

First

Middle Initial

Prefix (Mr., Ms.)

Suffix (Jr., II)

COMPANY/ORGANIZATION NAME: _____

SESSION DATE: _____

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 sponsoring employer certifies that the employee is an employee in good standing, that the employer has approved the employee's participation in the program, and that the employer will notify HBS if there is any material change in the employee's status prior to the program.

To be eligible for attendance, the candidate must be a full-time employee of the sponsoring company throughout the entire session of the *Program for Leadership Development*, and agree to return full-time to the sponsoring organization in a managerial role upon completion of the program.

It is understood that participants will be completely free of official duties while members of the program, and that they will not be asked to be absent from the program except for emergencies.

Please have your sponsoring executive complete this Sponsoring Statement. This document may be sent directly from the sponsoring official to the Admissions Committee or, if appropriate, may be sent together with the application.

The candidate's application will not be reviewed until both the application and Sponsoring Statement have been received.

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FAX: _____

COMPANY/ORGANIZATION WEBSITE: _____

EMAIL: _____



HARVARD | BUSINESS | SCHOOL

Executive Education

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PLEASE DESCRIBE THE CURRENT RESPONSIBILITIES OF THE APPLICANT WITHIN THE ORGANIZATION.

NUMBER OF REPORTING LEVELS ABOVE THE APPLICANT, UP TO AND INCLUDING THE CHIEF EXECUTIVE OFFICER OF THE PARENT COMPANY: _____

PLEASE PROVIDE AN ORGANIZATIONAL CHART.

HOW DOES THE COMPANY IDENTIFY AND EVALUATE "HIGH-POTENTIAL" INDIVIDUALS?

WHAT COMPANY PROCESSES OR PROGRAMS ARE IN PLACE TO DEVELOP THESE INDIVIDUALS?

HOW MANY OF THESE INDIVIDUALS HAS THE COMPANY IDENTIFIED AT THIS TIME?

PLEASE DESCRIBE YOUR OBJECTIVES IN NOMINATING THE APPLICANT FOR THE *PROGRAM FOR LEADERSHIP DEVELOPMENT*.

WHAT DISTINGUISHES THE APPLICANT FROM OTHER "HIGH-POTENTIAL" INDIVIDUALS?

WHAT PROSPECTIVE CHANGES ARE PLANNED IN THE APPLICANT'S POSITION AND/OR RESPONSIBILITIES UPON COMPLETION OF THE PROGRAM?

WHAT, IF ANY, LONG-RANGE ORGANIZATIONAL LEADERSHIP OBJECTIVES HAVE BEEN IDENTIFIED FOR THE APPLICANT AT THIS TIME?

HAVE YOU DISCUSSED THESE OBJECTIVES WITH THE APPLICANT? YES NO

HOW WOULD YOU EVALUATE THE APPLICANT'S STRENGTHS, AS WELL AS AREAS FOR DEVELOPMENT? CONSIDER SUCH FACTORS AS KNOWLEDGE OF FINANCE, HUMAN RELATIONS, MARKETING, AND LEADERSHIP.

HOME-BASED MODULES I AND III OF THE *PROGRAM FOR LEADERSHIP DEVELOPMENT* REQUIRE AN AVERAGE COMMITMENT OF 10 TO 12 HOURS PER WEEK. IS THE COMPANY WILLING TO SUPPORT THIS TIME COMMITMENT DURING THE COURSE OF THE PROGRAM? YES NO

LANGUAGE PROFICIENCY

Proficiency in spoken and written English is essential for active participation in the fast-moving classes and small group discussions. If English is the applicant's second language, or if he or she has less than one year's experience working in an English-speaking environment, please provide a brief statement documenting his or her proficiency. *(The Admissions Committee also may request an interview.)*

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Program for Leadership Development
Harvard Business School
Soldiers Field
Boston, MA 02163-9986 U.S.

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Fax: +1-617-496-1731

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