

TO: APHSA CEOs and ISM Sponsors

RE: Nominate an up and coming leader for the 2016 APHSA-ISM Emerging Leaders Program!

The APHSA-ISM Annual Conference is launching a new **Emerging Leaders Program** to involve rising leaders within the government and private sector who might not otherwise attend APHSA-ISM, and to provide them with specialized leadership training sessions and networking opportunities throughout the <u>ISM Annual Conference</u> in Phoenix, AZ September 18-21.

We need your help to identify Emerging Leaders who would benefit from attending the APHSA-ISM Conference and who will embrace this opportunity to engage with their peers and launch this new network. The Emerging Leaders Program is targeting individuals who meet all or most of the following criteria:

- Demonstrated high performance over a sustained period
- Seen as a future leader within the organization
- Roughly 5-10 years of relevant work experience
- Currently in a management/supervisory role but not yet in an executive position
- Likely to assume executive responsibility within the next 3-5 years
- Focus should be on individuals responsible for advancing and modernizing technology in health and human services

**Nomination Process:** To have someone considered for this inaugural Emerging Leaders Program, please nominate <u>ONE</u> individual from your organization by completing the Emerging Leaders Nomination form and submitting by <u>Friday</u>, <u>July 8</u>, <u>2016</u>.

Applications will be reviewed by ISM and HSITAG Executive Councils to confirm all nominees meet target criteria. Nominees will be notified, in writing, by Friday, July 22 with further instructions on how to register, secure hotel and travel.

The selected nominees from the government sector for the Emerging Leaders Program will automatically be considered for a fellowship to cover the cost of attending the ISM Annual Conference. Selected nominees from the private sector will be expected to cover the cost of registration, hotel and travel.

We look forward to receiving your nomination and welcoming your Emerging Leader to the APHSA-ISM Annual Conference!

On behalf of the APHSA-ISM Conference Committee,

Tracy Wareing Evans
Executive Director, APHSA

Paul Hencoski Principal, KPMG LLG



## APHSA Emerging Leader Nomination Form

Please complete this form in its entirety to nominate an emerging leader within your organization to participate in the inaugural APHSA Emerging Leaders Program which will be launched at the 49th Annual ISM Conference in Phoenix, Arizona.

	Em	erging Leader Nominee (pe	rson to be	considered)	
Full Name:				Title:	
i dii itaiilo.	First	Last		Title	
Organization					
	Organization				
Address:					
7.00.000.	Street Address				
	City			State	ZIP Code
Phone:		Email:			
	Phone		Email		
	THORE		Linaii		
		Has the nominee attended I	SM before?	YES 🗌	NO 🗌
la thair	rolo in vour organi	zation considered management/s	upon/icon/2	YES 🗌	NO 🗌
15 111611		r of years of relevant work experie			
	Numbe	or years or relevant work expens	ence.		
		Nominator (person	nominatin	<u>g)</u>	
Full Name:				Title:	
	First	Last		Title	
Organizatio	n·				
Organization	Organization				
	3				
Phone:		Email:			
	Phone		Email		
How long ha	ve you known the		Does	s the Nominee report	
nominee? (# of months or years)			_	directly to you?	YES NO
,	·	-	_	- •	

## Nomination

Please provide concise answers/comments to the following to assist in the selection process. All questions are required for consideration. Incomplete nominations may not be forwarded to the review committee.

## Why the Nominee is an Emerging Leader Provide examples of how this individual has collaborated or led internal projects within the organization or community to demonstrate their commitment to the human services sector, especially as to modernizing

technology and/or business processes.
What actions or attributes qualify them as an emerging leader?
Provide insight on how the nominee actively communicates with peers and supervisors to help encourage team participation/interaction on projects.
Share any additional insights as to why this nominee is considered an emerging leader.
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Share how you see this nominee contributing to the program (what might other peers learn from this individual, etc).

Acknowledgements						
Please check the following acknowledgements which demonstrate your commitment to supporting this nominee as a participant in the APHSA Emerging Leader Program.						
☐ If selected, I understand this will require in-person attendance by the nominee at the 2016 ISM Annual Conference September 18 – 21, 2016 in Phoenix, AZ.  ☐ The nominee is aware that they have been nominated for this program.  ☐ If selected, the nominee understands that they must participate in an Emerging Leaders Poster Session and three (3) sessions designed for the Emerging Leaders Program during the ISM Annual Conference.  ☐ If a government nominee: We understand, if selected, APHSA may provide conference registration, lodging for four (4) nights and airfare (not to exceed \$500) for the nominee.  ☐ If a private sector nominee: We understand, if selected, my organization is responsible for registration, airfare and lodging to attend the conference.						
Travel Needs for Government Nominees						
(Response will not have any bearing on the selection process. This is for budgeting purposes only.)  If selected, we will require the following travel assistance in addition to Registration Fees:						
Full Fellowship	YES 🗆	NO 🗌				
(Registration, Lodging (4 nights), Airfare [not to exceed \$500)] Partial Fellowship (Lodging (4 nights) and Airfare (not to exceed \$500))	YES 🗌	NO 🗌				
Partial Fellowship (Lodging (4 nights) only)	YES 🗌	NO 🗌				
Partial Fellowship [(Airfare (not to exceed \$500) only]	YES 🗌	NO 🗌				
No assistance is required, my organization will cover my travel	YES 🗌	NO 🗌				
Disclaimer and Signatu	ire					
If this nomination leads to acceptance into the APHSA Emerging Leaders Program, it is understood that the nominee will participate fully in the program as indicated above and they have my full commitment to do so. Your typed signature or electronic signature is acceptable.						
Signature:	Date:					
Title:						