



Doyon Leadership Training

APPLICATION DEADLINE: September 7, 2018 at 5:00 p.m. AKDT

Doyon Leadership Training (DLT) is a program that provides participants with personal, interpersonal, management, and leadership skills training.

- You **MUST** be a Doyon Shareholder or a full-time Doyon Family of Companies (DFOC) employee to apply.
- This program is designed to provide training to develop personal and professional goals and to increase the pool of shareholder candidates for leadership or managerial positions.
- Between 12 to 18 individuals will be selected for the program. Assessment of eligibility and selection will be based on submitted application packet and evaluated on a point system. A phone interview will be conducted for finalists.
- You must be willing to attend monthly training sessions lasting 3-4 days for five months. Modules will take place over weekends. Additionally, you **MUST** participate in coaching and teleconferences, develop goals, acquire a mentor and complete other assignments, such as required reading.
- Doyon, Limited will pay for the cost of training, transportation, and lodging. Other associate expenses are not reimbursable.
- The information submitted should reflect your desire to obtain this training. Please answer all of the questions thoroughly. You are welcome to submit all required documents without using this application as long as it is typed and answers the questions in the same sequence.
- Successful completion of this training does not guarantee employment within the Doyon Family of Companies.

Please Note: the first DLT module will take place October 25 -27, 2018 in Fairbanks, Alaska.

Required checklist for complete application:

- Cover letter briefly describing:
 - Why you are interested in the program
 - Why you are a strong candidate for the program
 - What you hope to learn or achieve by participating in the program
- This application (or prepare this material in a typed package in the same sequence)
- A Resume
- Two (2) professional recommendations

If you need further information please contact: Shareholder Outreach at 459-2085 (in Fairbanks), 1-888-478-4755 (toll-free), or andonm@doyon.com



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I. APPLICATION FORM

NAME: _____

ADDRESS: _____

PHONE: (home): _____ PHONE: (work/cell): _____

II. EDUCATION/TRAINING

	NAME OF INSTITUTION	DEGREE/ CERTIFICATIONS	TYPES OF STUDY/MAJOR	DATES
COLLEGE:				
COLLEGE:				
TECHNICAL SCHOOL:				
OTHER:				

COMMITMENT

I understand the purpose of Doyon Leadership Training and if I am selected as a candidate, I will be required to sign a Commitment of Understanding, attend monthly trainings, teleconferences, coaching and mentoring sessions, and dedicate personal time and resources in or order to successfully complete this program.

SIGNATURE: _____ DATE: _____

SUBMIT APPLICATION PACKET TO:

Applications can be submitted by mail, fax, or email.

Doyon Shareholder Outreach

1 Doyon Place, Suite 300

Fairbanks, AK 99701

Fax: 907-459-2115

Email: andonm@doyon.com

RECEIPT DEADLINE: September 7, 2018, at 5:00 p.m. AKDT

Applications received after this date or received incomplete by this date will not be considered.

IV. RECOMMENDATION (to be completed by reference)

*Letters from supervisors are highly preferred.

Please complete the following request for information or write a letter that contains the following information as part of the application packet for the Doyon Leadership Training Program.

Name of Applicant: _____

Recommended by: _____

A. How long have you known the applicant? ___ Years ___ Months

B. In what capacity have you known the applicant?

C. What are some of the applicant's skills and accomplishments? Please include examples.

D. Please provide examples of how the applicant shows promise of continued development and professional growth.

E. Please provide examples of the applicant's capabilities as a leader.

F. To what extent is the applicant motivated?

Signature: _____ **Contact phone:** _____

Address: _____ **Email:** _____

V. RECOMMENDATION (to be completed by reference)

*Letters from supervisors are highly preferred.

Please complete the following request for information or write a letter that contains the following information as part of the application packet for the Doyon Leadership Training Program.

Name of Applicant: _____

Recommended by: _____

G. How long have you known the applicant? ___Years ___Months

H. In what capacity have you known the applicant?

I. What are some of the applicant's skills and accomplishments? Please include examples.

J. Please provide examples of how the applicant shows promise of continued development and professional growth.

K. Please provide examples of the applicant's capabilities as a leader.

L. To what extent is the applicant motivated?

Signature: _____ **Contact phone:** _____

Address: _____ **Email:** _____