Hostos Emerging Leaders Program

- All students are invited to apply; including freshman, CUNY Start and CLIP
- Must have a desire to lead, to grow and to become a stronger student
- Must be enrolled for a minimum of six credits
- Must be willing to commit to 16 hours of community service per semester
- Must be able to attend meetings, workshops and retreats
- Must meet eligibility requirements each semester
- Must have enthusiasm, dependability, maturity, initiative, dedication, ethics, leadership qualities, interpersonal skills and a genuine interest in professional growth and community service.

Documents Needed:

- Application
- A letter of Recommendation
2022-2023 Hostos Emerging Leaders Program Application Form

(Please print clearly)

Full Name: ____________________________________________________________

CUNYFirst ID#: __________________________________________________________

Address: ______________________________________________________________

_____________________________________________________________________

City________________________State____Zip Code__________________________

Home Phone __________________Mobile____________________Work________________

E-mail: ____________________________ (Please Print)

Parent/Guardian’s Name: ________________________________________________

In case of emergency, please contact: ______________________________________

Emergency phone#: ______________________________________________________

Applicant’s Classification (circle one): Freshman Sophomore

Birthdate: ______________________ CUNY Start CUNY Language Immersion Program

Major: __________________________ Hostos Lincoln Academy- Community Partnerships Program

Cumulative GPA: ____________ Early College Initiative

(If available) Expected Date of Graduation: _____/_____

I have read and understand the Student Leadership Academy Program description and requirements. Furthermore, I affirm that the information that I have provided in this application is factual. I understand that any false statements provided in this application will automatically disqualify me as a candidate for the Student Leadership Academy Program. Since the Student Leadership Program carries with it privileges and responsibilities, I hereby give permission to the Office of Student Leadership and the Student Leadership Coordinator to access my academic and judicial records with Hostos and CUNY. This information will be used for the sole purpose of determining minimal qualifications for my eligibility to participate in this program.

Signature / Print Name / Date
1) Why would you like to be a member of the Student Leadership Academy?

____________________________________________________________________

____________________________________________________________________

____________________________________________________________________

2) What skills or qualities do you feel that you possess that will contribute to the Hostos Emerging Leaders Program?

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____________________________________________________________________

____________________________________________________________________

3) Are you a member of any clubs or organizations on the Hostos campus? Do you hold any executive positions?

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____________________________________________________________________

____________________________________________________________________

4) What do you feel would be the greatest contribution you can make to your community as a leader?

____________________________________________________________________

____________________________________________________________________

____________________________________________________________________

5) What, if any community service activities have you participated in over the past year?

____________________________________________________________________

____________________________________________________________________
Please list the name and phone number of a reference from whom you are requesting a recommendation. This should be a member of the HCC faculty or staff.

Name: ________________________________ Phone Number: ________________

Please have your reference complete the following recommendation form and return with their Letter of Recommendation.

All forms must be submitted to Jlibfeld@hostos.cuny.edu.
HCC STUDENT LEADERSHIP ACADEMY
Office of Student Leadership Development
450 Grand Concourse, Room C-392, Bronx, New York 10451
(718) 518-6541, StudentLeadershipAcademy@hostos.cuny.edu or jlibfeld@hostos.cuny.edu