

**DEFENSE SENIOR LEADER DEVELOPMENT PROGRAM (DSLDP)  
CLASS OF 2010 NOMINEE INFORMATION SHEET**

Name: \_\_\_\_\_  
Prefix: Mr./Ms./Dr.    First Name                      Middle Initial                      Last Name    Suffix: Jr./Sr.

Preferred first name: \_\_\_\_\_

Unclassified email address: \_\_\_\_\_

Employing Component: \_\_\_Army \_\_\_Navy \_\_\_Air Force \_\_\_Fourth Estate \_\_\_Intelligence  
If Combatant Command, list COCOM: \_\_\_\_\_  
If Army, Navy, or Air Force, list major command: \_\_\_\_\_  
If Fourth Estate or Intelligence, list employing agency: \_\_\_\_\_

Job title: \_\_\_\_\_

Occupational Series (4-digit code): \_\_\_\_\_

Pay Plan/Pay Schedule: \_\_\_\_\_ Permanent Grade/NSPS Band: \_\_\_\_\_

Date of last promotion: \_\_\_\_\_  
If in a pay banding system other than NSPS, list equivalent GS grade level \_\_\_\_\_

**Supervisory Experience**

Are you currently a supervisor (rating official) of record? \_\_\_\_ yes \_\_\_\_ no  
Supervisory Title (if different than your current job title): \_\_\_\_\_  
If no, have you ever been a supervisor? \_\_\_\_yes \_\_\_\_no Year last supervised: \_\_\_\_\_  
If yes, how long have you been a supervisor (total number of years)? \_\_\_\_\_ years  
How many people do you supervise? \_\_\_\_\_  
Have you ever been a 2<sup>nd</sup> level supervisor? \_\_\_\_yes \_\_\_\_no If Yes, for how long? \_\_\_\_years

Acquisition Corps member: \_\_\_\_ yes \_\_\_\_ no

Organizational name and symbol: \_\_\_\_\_

Organizational mailing address: \_\_\_\_\_  
\_\_\_\_\_

Supervisor's Name and Title: \_\_\_\_\_

Supervisor's e-mail address: \_\_\_\_\_

**Senior-level Professional Military Education**

\_\_\_\_ Have previously completed (attach copy of diploma or transcript).  
Provide school and dates: \_\_\_\_\_

\_\_\_\_ Have not previously attended.  
Preferred school (in rank order): 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

**PME School Options for DSLDP:**

Army War College    College of Naval Warfare    Air War College    National War College    ICAF

I certify that all information contained in this application is true and accurate to the best of my knowledge. I also understand that a reasonable degree of functional, organizational and geographical mobility is expected in order to gain experiences in multiple environments and to attend a 10-month resident senior-level PME school that may be geographically apart from my current Permanent Duty Station.

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Nominee's Signature

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Date

**PRIVACY ACT INFORMATION**

Authority: The Government Employees Training Act of 1958 (USC, Title 5, 4101 to 4118), EO 9397, November 1943 (SSN).  
Purpose and Use: Used in the administration of the Federal Training Program.  
Disclosure: Personal information provided in this application package is given on a voluntary basis. Failure to provide this information, however, may result in ineligibility for participation in training programs.