

INSTITUTE FOR LEADER DEVELOPMENT



Lead Integrated Capability Nomination Form

This extensive programme is aimed at people leaders who are moving into roles implementing the strategic agenda, developing future strategic leaders, promoting strategic collaboration and promoting organisational excellence (tier 2-3). This programme includes 5 phases over 6 months with a small cohort of 12 leaders.

Note: The residential phase involves physical activity components (either **Sailing** or **Caving**) for which participants will need to complete a **medical declaration** as a prerequisite to being accepted into the programme. Read more information on the caving requirements in the 2024 Leadership Courses and Programmes flyer.

More detail is available on the Leadership Development Centre's website: ldc.govt.nz/programmes-and-events/agency-programmes

| Personal details | |
|--|--------------------------------------|
| Name: | |
| Email: | Phone: |
| Current employment details | |
| Job title: | |
| Agency/organisation: | |
| Γier level: Years in current role: | |
| Demographic details What is your gender? | |
| Male | |
| Female | |
| Another gender, please specify: | |
| Don't know | |
| Prefer not to answer | |
| Which ethnic group(s) do you belong to? | , Niuean |
| New Zealand European | |
| Māori Samoan | Chinese Indian |
| Cook Islands Māori | Other e.g Dutch, Japanese, Tokelaun. |
| Tongan | Please specify: |
| rongan | Prefer not to answer |
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Briefly describe your current role, including

| • | number | of team | s/people | you manage |
|---|--------|---------|----------|------------|
|---|--------|---------|----------|------------|

| • \ | vour | respons | sibilities |
|-----|------|---------|------------|
| | | | |

| Provide a summary of your previous management/leadership roles experien | се |
|---|----|
|---|----|

What are your individual and professional development goals? Describe how this course aligns with your development goals

List any career or leadership development you have completed in the last 5 years

Are you a member of Te Pae Turuki, Public Service Leaders Group?

Yes No Don't know

Are you on a Development Board cohort, previously known as Career Board?

Yes No Don't know



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Caving: It is important you understand the risks involved and can make a judgement as to whether your physical and medical fitness meets the requirements of caving.

| You must have a moderate level of fitness for this programme. | | | | |
|---|--|--|--|--|
| Participant agreement | | | | |
| I have read the caving information in the 2024 Leadership Courses and Programmes flyer and understand the physical conditions required for acceptance onto the programme. | | | | |
| Manager details and authorisa | ation | | | |
| | oplicant to participate in the programme and that this e full course fee if this application is successful. | | | |
| Name | | | | |
| Agency/organisation | | | | |
| Division | | | | |
| Position title | | | | |
| Email | | | | |
| Phone | | | | |
| , , <u> </u> | applicant to participate in the programme and that this e full course fee if this application is successful. | | | |
| Name | | | | |
| Agency/organisation | | | | |
| Position title | | | | |
| Email | | | | |
| | | | | |

Invoicing instructions - Please include purchase order number/cost centre code, billing address and email to send invoice to (invoices will be raised by NZDF)

Send your completed form to: ldcprogrammes@ldc.govt.nz

If you have any queries, email: ldcprogrammes@ldc.govt.nz or phone:04 473 2222