

The APWU Leadership Institute is open to all full dues-paying APWU members in good standing with a demonstrated involvement in the union. To apply:

1. Fill out this form, using extra paper if needed, and mail to:

APWU Leadership Institute,  
7th Floor, 1300 L ST NW,  
Washington, DC 20005, or

Complete the online form at  
[apwu.org/institute](http://apwu.org/institute)



2. All applications must be accompanied by a recommendation from a local, state, or national officer. Recommendations from community leaders are also welcome. Use the Recommendation Form to ask a leader to write a recommendation for you and return it with your application.

## APPLICANT CONTACT INFORMATION

Name \_\_\_\_\_

Local \_\_\_\_\_ Length of Service \_\_\_\_\_

Craft: ☐ Clerk ☐ Maintenance ☐ Motor Vehicle Service ☐ Support Services

Job Title \_\_\_\_\_

Home Address \_\_\_\_\_

Email \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

## UNION INVOLVEMENT AND LEADERSHIP EXPERIENCE

Please answer each of the questions below, using additional paper if needed (200-300 words each).

1. Why do you wish to attend the APWU Leadership Institute?

2. Discuss your qualifications for participating in this program.

3. Please share how and why you became involved in your union and your current union activities.

4. How do you see the future of the APWU and the Labor Movement and your role in it?

5. Please share any experience with activism outside of APWU such as volunteer or community activities and/or other relevant skills or qualifications that you think may be relevant to your application.

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### CURRENT AND PREVIOUS UNION POSITION(S) AND DUTIES

Please identify your present union position(s) and any previous positions held, if any.  
Include dates of service (e.g. Local President, May 2022 – present).

Position	Date
Position	Date
Position	Date

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### APPLICANT STATEMENT OF COMMITMENT

I, \_\_\_\_\_, hereby commit to:

- \* Complete all phases of the APWU Leadership Institute and all projects associated with the program.
- \* Seek advice and assistance from union and community leaders in both my union work and my APWU Leadership Institute projects.
- \* Work hard, take on new tasks, learn new skills, gain new knowledge, and adhere to the highest standards of integrity in all my APWU activities.
- \* Seek to develop myself into an effective, well-rounded union leader.

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Signature	Date
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CERTIFICATION: I certify that I have not held, accepted or applied for a supervisory position in the Postal Service for any period of time during the past two years.

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Signature	Date
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If you have any questions about the Leadership Institute including the application process, please send an email to [Institute@apwu.org](mailto:Institute@apwu.org).



# Applicant Recommendation

(To be completed by person recommending the applicant)

Name of Applicant to the Leadership Institute \_\_\_\_\_

## RECOMMENDER'S CONTACT INFORMATION

Name \_\_\_\_\_

APWU Local or Other Organization \_\_\_\_\_

Officer or Title \_\_\_\_\_

Craft:      ☐ Clerk      ☐ Maintenance      ☐ Motor Vehicle Service      ☐ Support Services

Address \_\_\_\_\_

Email \_\_\_\_\_

Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Please state why you believe the applicant should participate in the APWU Leadership Institute. Explain how long you have known the applicant and your sense of his or her potential as a future union leader. Please return this form to the applicant.