Leadership at the Peak Application



*Responses are mandatory for all questions. You can also complete your application online at: ccl.org/lap-application

Applicant Information	
First Name:	Last Name:
Current Position Title:	
Length of Time in Current Position:	
Organization Name:	
Work Address (No PO Boxes):	
City:	State/Province:
Zip/Postal Code:	Country:
Email:	Best Contact Number:
Assistant Information	
Full Name:	
Email:	
Best Contact Number:	

Applicant Questions

Title of person to whom you report:

Total number of employees in entire organization:

Budget you manage:

How many individuals directly and indirectly report to you?

Describe your role and primary accountabilities in the organization:		
What are you hoping to gain from completing this program?		
Total years of experience leading others. Briefly describe.		
Total years of international experience. Briefly describe.		
How did you learn about this program?		
Please provide your LinkedIn profile URL:		
Date and location of program for which you w	ish to apply:	
Program Date 1st Choice:	Program Date 2nd Choice:	
1st Choice Location:	2nd Choice Location:	
View <u>available LAP dates and locations</u> .		
Learning & Development Contact Information		
Full Name of L&D or HR Point of Contact:		
Email:		
Best Contact Number:		

Important Policy Informatio	n
	r: Please review our <u>Cancellation and Transfer Policy</u> and you have read and understand the information. In the event of e held to this policy's guidelines.
Regarding COVID: Please read our most current <u>COVID FAQS & Protocols</u> and then check the box to indicate that you have read and understand the information.	
Required Assessment Completion: Please note that if accepted to LAP, you will be advised of a dead-line for the submission of your required assessments, which support the program's personalized learning and executive coaching components. Please check the box to indicate that you understand that if you do not meet your deadline for assessment completion, there is a high probability that you will be transferred to a future date and charged applicable transfer fees in accordance with the above policy.	
Signature:	Date:
Application for LAP in Colorado Springs, CO: lapsupport@ccl.org	
• Application for LAP in Europe: emea ge@ccl org	

Application for LAP in Europe: <u>emea.oe@ccl.org</u>

Application for LAP in Singapore: ccl.apac@ccl.org

The LAP Program Advisor will contact you within 2-3 business days of the receipt of your application.