

Thank you for your interest in the 2024 Minnesota Excellence in Public Service (MEPS) Series!

- This year's program will consist of eight (8) <u>full-day sessions</u>, tentatively scheduled on: **January 27**, **February 17**, **March 16**, **April 20**, **May 11**, **July 13**, **August 17**, and **September 21**. An optional trip to Washington, D.C. and post-trip social session will also be planned for June dates TBD.
- Selected participants are responsible for paying a tuition fee before the first class or making other agreeable payment arrangements. Funds can come from the participant and from others who support her participation. Scholarship support may also be available upon request. Participants who choose to travel to D.C. will also be responsible for an additional trip fee and their own airfare.
- Want to know more? Virtual information events are being held prior to the application deadline. These "Introduction to MEPS" events are being held on select weeknights and Saturday mornings. To introduce yourself, and request the dates and a participation link, please send an email to:

 MepsSeries@gmail.com.

YOUR APPLICATION, THE TIMELINE & THE PROCESS:

Please send your completed application & resume by <u>December 30, 2023</u>.

You can submit your materials by:

Electronic submission to: MepsSeries@gmail.com (which is preferred). You can also send by fax to (651) 207-5655, or mail a paper submission to: MN Excellence Series, c/o 1390 Skillman Ave. W., Saint Paul, MN 55113

Please do not be intimidated by this application. This form and your resume will not be the sole determinant of selection and are simply the step which begins the process of getting to know you. All the information on this candidate application is confidential. If chosen as a finalist, you will be notified in early January, and we will work with you to schedule a date and time for a personal interview with the Fellows Selection Committee. MEPS reserves the right to choose program participants based on several criteria that are critical to success in the program and for future leadership in the public arena and/or their communities. Notification of acceptance or rejection to the program will be communicated by mid-January and the first class is Saturday, January 27, 2023.

Additional information can be found at: www.mnexcellenceseries.com. Questions can be directed to: MepsSeries@gmail.com.



CONFIDENTIAL CANDIDATE APPLICATION

Name:	
Date:	
County of Residence:	



PERSONAL DATA

Name $\stackrel{\square}{\overset{\mathrm{Ms.}}{\overset{\square}{\overset{\mathrm{Mrs.}}{\overset{\square}{\overset{\mathrm{Miss.}}{\overset{\square}{\overset{\square}{\overset{\mathrm{Ms.}}{\overset{\square}{\overset{\square}{\overset{\square}{\overset{\square}{\overset{\square}{\overset{\square}{\overset{\square}{\overset$								
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Nickname:			Ag	e		Birth Date_	/	/
Address:								
Check here if you want information sent to this address.		City				State	Zip	Code
Best Telephone #	()						
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Email Address								
Facebook profile nam	e (if ap	plicable	e):					
Twitter handle (if app	licable)	:						
Linked In name (if ap								
Other Digital Presen	ce (Inst	agram,	websi	te, blog, e	etc):			
Business Name								
Job Title (if applicable)								
Address								
Check here if you want information sent to this address.	,	City				State	Zip	Code
Business Telephone	()						
Fax	()						



BACKGROUND DATA

PROFESSIONAL ORGANIZATIONS:
Please list all organization you presently belong to or have belonged to in the past,
and indicate any leadership positions held, with dates of membership.
Volunteer/Community Activities:
Please list community, civic, professional, political, business, cultural, religious,
social, athletic, etc., organization to which you have volunteered your time and for
which you have not received monetary compensation. Please indicate how you have
assisted the organization and for how long.
SPECIAL HONORS/AWARDS/LEADERSHIP ACTIVITY/OTHER ACHIEVEMENTS:
Please list the year the achievement was recognized, and specify the significance of
the award as related to this application:
or of the control of



In your career, what do you consider	der to be your most outstanding achievement so far?		
In your life, what do you consider	to be your most significant accomplishment so far?		
Are you a member of any Republica	an organizations? Please identify.		
MN Congressional District:	Precinct/County you vote in:		
State House District:	State Senate District:		
What is the name and email addre	ss of your Republican BPOU* Chair (wo)man?		
How did you first learn about the N	Minnesota Excellence in Public Service Series?		
Have you ever been arrested?	Yes No (If yes, please explain)		



Do you envision yo	urself as a candidate so	ometime in the future?	
	Yes	No	Not Sure
•	you feel you would like tribute to the civic life o		program and what
attendance is mand confidentiality of al my support for the I increase my level of my permission to us	f accepted into the Minn latory at all sessions, exc l information shared du Republican party, candi participation in the poli se both my name and ph Minnesota Excellence in	rept in case of emergency ring the class sessions. dates, and conservative itical arena in the next potograph in any publication	y. I will honor the I am able to confirm ideals, and will five years. I also give
	Signed		
	Date		



REFERENCE INFORMATION

To be considered as a candidate for the Minnesota Excellence in Public Service Series, <u>you must be sponsored by 2 individuals (fellow Republicans or business/professional/community associates).</u>

TO BE COMPLETED BY ONE OF YOUR SPONSORS

I hereby nominate Minnesota Excellence in Public Services Series. I am not rel	as a candidate for the			
Minnesota Excellence in Public Services Series. I am not rel	lated to the nominee.			
Please explain why you believe this person should be considered for the Series.				
Please explain how you know the nominee.				
Signature				
SPONSOR Printed Name:				
Address:				
Email Address:				
Phone:				



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Please explain why you believe this person should be considered for the Series.				
Please explain how you know the nominee.				
Signature				
SPONSOR Printed Name:				
Address:				
Email Address:				
Phone:				



PLEASE ATTACH A CURRENT RESUME TO INCLUDE:

(PLEASE BE AS DETAILED AS POSSIBLE)

EMPLOYMENT HISTORY

Please include employment history for the last ten years.

PROFESSIONAL ORGANIZATIONS

Please include any special professional or work-related honors/awards.

VOLUNTEER AND COMMUNITY ACTIVITIES

Please list community, civic, political, cultural, religious, and social organizations to which you have volunteered your time and for which you have not received monetary compensation.

EDUCATION

Please include high school and all further education such as trade school/ specialized training, partial college attendances and degrees received as well as any academic awards or honors.

**Please note that any applicant who is accepted for Fellowship in the MEPS Series will be expected to provide a brief biography and electronic photo on or before the first day of class, for possible use on the MEPS Series website and other applicable materials.