



MULTICULTURAL
CENTER OF MARIN

PRESENTE

**LEADERSHIP PROGRAM
APPLICATION 2022-2023**



**Indicates required field*

Name Applicant *

Middle Initial *

Last Name *

D.O.B. *

Address *

Email *

Apt./Unit # *

City *

Phone Number *

State: *

Zip Code *

Program Applied to: *

Parent/Padre Name/Nombre *

Phone/Teléfono *

EDUCATION

Level of Education *

Name of High School/College *





Did you graduate? *

Year completed or attending during 2022-2023 (school)

School Counselor Name *

REFERENCES

Please attach two letters of reference. Please attach two letters of reference (one from each person listed below). They should be people who know you well and willing to recommend your nomination to the program We might need to contact them in case more information is needed about your nomination You can show them the fellowship description if necessary.





Reference 1

First Name *

Middle Initial *

Last Name *

Relationship (Teacher, PO, Community Leader, etc.) *

Address: *

Phone Number *

Reference 2

First Name *

Middle Initial *

Last Name *

Relationship (Teacher, PO, Community Leader, etc.) *

Address: *

Phone Number *





**PLEASE RESPOND THE FOLLOWING 6
QUESTIONS (KEEP IT REAL)**

I. Describe the conditions and people of your community/neighborhood (if you have moved, describe the neighborhood you know best) *



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2. Describe your family/home life in a few sentences. *

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3. Describe an aspect of your identity that is important to you: (Your culture/country/nationality/ethnicity/race/gender/physical ability or sexual orientation) *

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4. Discuss a major problem that you see facing your community or group today. *



5. Explain why you are a good candidate for this fellowship. *

6. What is your understanding of leadership and what do you expect from the Presente program? *





DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge. If my nomination is accepted, I understand that false or misleading information in my application or interview may result in my disqualification or release from the Fellowship Program.

Name of Applicant *

Date (MM/DD/YYYY) *

If you have questions about this application, please contact Youth and Family programs manager, Diango Reyes at The Multicultural Center of Marin.

Cell: (209)-741-9967

Office: (415)-526-2486

Dreyes@multiculturalmarin.org

