Office of Employee Relations

New York State Public Employees Federation

2027 Leadership Development Program

For New York State Employees in the Professional, Scientific, and Technical Services (PS&T) Unit Grade 23 and above

Application

Employee Information

Print Name:		
Agency:	Agency/Facility Code:	
Facility (if applicable):	Employee ID Number: **N**	
Work Address:	Email address:	
Work Phone:	Cell Phone	
Civil Service Job Title:		Grade Level:

Narrative Questions – Instructions

Responses provided by you and your agency in this application will be an important factor in the selection process. Please use separate sheets to answer these questions and put your name on each sheet. Even if you do attach a resume, you are still required to answer all questions completely. Answers should be double spaced and no more than two paragraphs (approximately 100 words) per question. If additional space is needed to respond to Questions 1-6, please use a seperate sheet to answer these questions.

Questions

1. What are your current job responsibilities? *Briefly* include in this description typical, continuing responsibilities, not what you do occasionally.

2. What is the scope of your responsibility? *Briefly* describe your roles and responsibilities as a supervisor or manager. Include the size, scope, and mission of the units that report to you, and any committees or teams, voluntary or otherwise, that you lead or to which you belong. If applicable, describe how you or your work unit has an opportunity to influence strategic decisions or policies within or outside your agency.

3. What is your employment history? Provide information on your last two positions only, even if your last two positions were not in State government.

4. What are your primary reasons for applying to the Leadership Development Program (LDP)?

5. List or explain any educational programs you have attended in the last two years that support your leadership development skills.

6. If accepted into the LDP, how will you apply what you learn to your current job?

Program Dates

Session One–Classroom	**Dates**	**Times**
Orientation	April 6, 2027	2:00–4:00 pm
Training Part 1 (3 full days)	April 7–9, 2027	8:30 am–4:30 pm
Training Part 2 (4 full days)	May 18–21, 2027	8:30 am–4:30 pm
Communication Simulations *Participants will be assigned to groups on day 3 of Training Part 2.*	May 20, 2027	1:00–4:30 pm
Follow-up and Graduation	July 30, 2027	2:00–4:00 pm
Session Two–Virtual	**Dates**	**Times**
Orientation	April 26, 2027	2:00–4:00 pm
Training Part 1 (6 half-days)	April 27–30, 2027 May 3–4, 2027	9:00 am–12:30 pm 9:00 am–12:30 pm
Training Part 2 (7 half-days)	June 2–4 , 2027 June 7–10, 2027	9:00 am–12:30 pm 9:00 am–12:30 pm
Communication Simulations *Participants will be assigned to groups on one of the dates listed for a half-day session from 9:00 am–12:30 pm or 1:00–4:30 pm.*	June 11, 2027 June 14–16, 2027	9:00 am–12:30 pm or 1:00–4:30 pm
Follow-up and Graduation	August 20, 2027	2:00–4:00 pm

Please check the session for which you are applying:

Classroom ☐ Virtual Session ☐

Would you be willing/able to attend the other session if your first choice is full? (Check Yes or No)

Yes ☐ No ☐

Please Note: Applicants must complete and sign the application, obtain the required signatures, and submit to their training office in PDF format.

Training offices are asked to review applications for completion prior to sending to the LDP Selection Committee at ljackson@albany.edu by the December 18, 2026, application deadline. Selections will be made by January 29, 2027. Participants and their respective agencies will be notified shortly thereafter.

Applicant Signature

The information I have provided in this application is true and accurate to the best of my knowledge. If accepted, I understand there are assignments and evaluation surveys that must be completed to graduate from this program. I also understand that attendance is mandatory.

Print Name: Date:

Signature: Date:

Supervisory Recommendation (Required)

In the space provided, briefly explain why you recommend the applicant to participate in the LDP based on the following information and its relation to their leadership role. (Attach additional sheets if necessary.)

Current job responsibilities:	
Scope of responsibilities:	
Why is this person a good candidate for this program?	
Supervisor's Name (Please print):	
Title:	
Work Phone:	Email address:
Signature:	Date:

Agency Endorsement (Required)

The Agency Head or their designee must endorse this application.

I support _____'s (print employee name) application to participate in the LDP. The employee will be released, without charge to leave accruals, to participate in all sessions of the program. The participant will be given reasonable time and any other support that the employer deems reasonable and necessary to ensure completion of the job-related project.

Print Name:	
Title:	
Work Phone:	Email:
Address:	
Signature:	Date:

PEF Representative Recommendation (Optional)

This can be from your Executive Board representative, Statewide Labor-Management Representative, Council leader or any other local leader or steward.

Name of PEF Representative: _____

Position Held by PEF Representative:

_____

Briefly explain why you recommend the applicant to participate in the LDP based on their union involvement in relation to their leadership role: (Attach additional pages if necessary.)

_____

_____

For additional information, please contact Deborah Seeley, OER Leadership Development Program Manager, at deborah.seeley@oer.ny.gov or (518) 474-6772; or PEF Education and Training Specialists Tammy Carney at tamara.carney@pef.org and Janna Herchenroder at janna.herchenroder@pef.org, or (518) 785-1900.

It is the policy of the state of New York to provide for and promote equal opportunity in employment and equal access to all programs and services without discrimination on the basis of age, race, color, national origin, sex, sexual orientation, gender identity, creed, military status, disability, marital status, domestic violence victim status, predisposing genetic characteristics, arrest record, previous conviction record, and any other status or condition protected by law.

Reasonable accommodations are available, upon request, in all aspects of state training, consistent with the Americans with Disabilities Act and the New York State Human Rights Law, to ensure that every individual is able to gain maximum benefit from the training experience.