

Disability Leadership Academy

Spring 2017 Application



Thank you for your interest in Disability Leadership Academy!

Before applying, please review the Disability Leadership Academy details on the brochure or website. To apply, please complete this application and mail or email it to the address below.

Deadline: Monday, January 9th 2017

Mail completed applications to:

Joanne Johnson
Disability Program
1221 SW 4th Ave Portland, Room 110
Portland, OR 97204

OR email: disabilityleadership@portlandoregon.gov

Have questions, need assistance, or accommodations to complete this application?
Call Joanne at 503-823-9970 or email disabilityleadership@portlandoregon.gov.

Disability Leadership Academy Schedule

Sessions run from 10am-3pm on Saturdays:

February 18	April 22
March 4	May 6
March 11	May 20
March 25	June 3
April 8	June 17

Your Contact Information

Name:

Email:

Phone:

Address:

City, State, Zip:

Do you prefer to be contacted by phone or email? _____

Application Questions

**Please make sure you've included your contact information on the first page. **

1. Disability Leadership Academy meets 10 Saturdays from February 2017-June 2018. I have reviewed the schedule (*on first page*) and I can attend all Academy sessions.

Please circle one: **Yes** **No**

Please share any information you think we should know about your availability. We will use this information to help us know how to support participants in the Academy.

2. Please share your experience working with other people with disabilities or working on disability community issues. *Remember, experience is not required to be accepted into our Academy.*
3. Please tell us how you have been involved in your community.
4. What do you hope to gain from Disability Leadership Academy?
5. How will you use what you've gained in Disability Leadership Academy in your community?
6. Please describe any accommodations you might need to be successful in Disability Leadership Academy. We will use this information to help us plan how to support participants.

Thank you for completing the application!

The next page is optional—you do NOT have to complete it to be considered.

OPTIONAL INFORMATION SHEET

Please note this optional information is on a page separate from application, and it will be separated from your application after you submit it

- *You do not need to provide this information. City government requests it so we can ensure that City of Portland services and programs reach Portlanders of all genders, ages, gender and sexual identities, races and ethnicities, mental and physical abilities and disabilities.*
- *Providing this information will not help or hinder the success of your application.*

If you do provide information requested below, Oregon and US law prohibits using it to discriminate against you. The City of Portland will protect your privacy.

- Please check all boxes that apply, you can check as many as describe you:

Your Age: 18-25 26-39 40-55
 56-70 Over 70

Gender identity: _____

Sexual orientation: _____

Born outside USA? Where: _____

African American Asian or Pacific Islander Caucasian
 Latino/a/x Native American or Alaskan Native
 Multiracial None of above. I am: _____

Disability: No Yes My disability is: _____

Thank you for sharing this information.
