

Inland Fellows

Program application



Name of candidate:

Male

Female

Minority status:

Home address:

Home phone: ()

Cell phone: ()

Present position:

How long?

Name of newspaper:

Newspaper group (if applicable):

Address:

Telephone: ()

Fax: ()

Email:

Name of immediate supervisor:

Telephone: ()

Email:

Please provide typed answers to these four points on a separate sheet attached to your application. Your name, address and phone number must be on the sheet. Also attach a copy of your current resume.

1. Please explain your current job responsibilities.
2. Please give details and dates of your previous work experience.
3. What are your short and long term career goals?
4. Why will this fellowship be helpful in your career in newspaper management?
5. Please attach a letter of recommendation from your publisher or general manager

I give the Inland Press Foundation permission to use the information on my application for statistical purposes, for contacting me via fax and email, and for possible source material for Inland publications.

Signature:

Date:

Publisher/General Manager Statement of Support: If accepted, I give the above applicant, an employee of my newspaper, permission and support to participate in the Inland Press Foundation Minority Fellowship Program as specified in the program's requirements. The applicant is a viable candidate to successfully pursue a career in newspaper management. I understand our newspaper organization may be responsible for half the cost incurred in the two-year program. If my newspaper qualifies for a scholarship, no cost will be incurred by my newspaper operation.

Signature:

Title:

Date:

INLAND
PRESS FOUNDATION

Return your application and resume to:

Inland Press Foundation, 701 Lee St., Suite 925, Des Plaines, IL 60016
(847) 795-0380 | FAX: (847) 795-0385