



## FY26 NAVFAC APPLICATION FOR MID-LEVEL LEADERSHIP PROGRAMS

Instructions: Please complete this application and submit along with other required documents sequentially and in one (1) PDF file with the file name: ML\_Last Name\_First Name\_Command.  
Example: ML\_Doe\_John\_Atlantic.

### SECTION I: APPLICANT INFORMATION AND PROGRAM SELECTION

Applicant			
First Name:		Last Name:	
Work Phone:		Personal Phone (Optional):	
Work Email:		Personal Email:	
Position Title:		Pay-Plan / Grade:	Series:
Command:		Directorates / Division / Community:	
Geographic Location:		DAWIA Functional Area:	
I have completed an IDP in the current fiscal year: Yes <input type="checkbox"/> No <input type="checkbox"/>		Note: DAWIA applicants have no competitive advantage in NAVFAC leadership program selections; this response is used to verify applicant is compliant with DAWIA requirements.	
I am a graduate of an entry-level development program: Yes <input type="checkbox"/> No <input type="checkbox"/>		If 'Yes': Name of Program: Year Graduated:	
Supervisor			
First Name:	Last Name:	Work Phone:	Work Email:
Senior Management Sponsor			
First Name:	Last Name:	Work Phone:	Work Email:
Note: Use the following NAVFAC command classifications to identify the Senior Management Sponsor required to complete this application. Echelon II, III, or IV: Community Leader (i.e., Leader, Directorate Leader, or equivalent); Other: PWO/DPWO/FEAD/ROICC.			
General Eligibility Requirements			
<ul style="list-style-type: none"><li>By the closing date of the application period, applicants must have been employed as full-time NAVFAC employees for at least one year.</li><li>In addition, please ensure you meet the minimal eligibility requirements which are located here: <a href="https://www.navfac.navy.mil/Careers/Career-Compass-Workforce-Development/Career-Compass-Resource-Center/Leadership-Programs/">https://www.navfac.navy.mil/Careers/Career-Compass-Workforce-Development/Career-Compass-Resource-Center/Leadership-Programs/</a></li></ul>			



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Instructions: Place a check mark by all programs you are applying for in the chart below. Supervisors, please check the box next to all the programs for which you support the applicant's application below.

PROGRAM	REQUIRED ELIGIBILITY	APPLICANT	SUPERVISOR
<b>NAVFAC PROGRAMS</b>			
<b>NAVFAC Aspiring Leader Development Program (ALDP)</b>	GS-07 through GS-12 (and equivalent pay plans)		
<b>NAVFAC Leadership Development Program (LDP) Level 1</b>	GS-12 through GS-13 Non-Supervisory		
<b>DON PROGRAMS</b>			
<b>Defense Civilian Emerging Leader Program (DCELP)</b>	GS-07 through GS-12 (and equivalent pay plans)		

Applicant Signature	Date	Supervisor Signature	Date
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Instructions: Check the boxes below to confirm you are able to meet each program requirement. Provide a comment to note any related modifications or conditions.

Agree	Requirement
<input type="checkbox"/>	I will contribute a portion of my time for study and personal improvement.
<input type="checkbox"/>	I understand and accept travel may be required. Failure to travel will require reimbursement for associated training costs already incurred by NAVFAC.
<input type="checkbox"/>	I understand that acceptance into the program provides an opportunity to develop leadership skills within my current grade position and does not guarantee a promotion.
<input type="checkbox"/>	If accepted in the LDP, I agree to abide by all requirements and guidelines of the program. I understand rotational assignments may be outside the commuting area and I will be expected to attend the LDP Training Session in March/April 2026. Failure to meet the program requirements will result in removal from the LDP.

Comments:

Applicant Signature	Date
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### SECTION II: STATEMENT OF INTEREST

Applicant Name:		Position Title:	
<p>Instructions: In 500 words or less, address each of the following:</p> <ul style="list-style-type: none"><li>• Your interest in participating in a leadership program</li><li>• Why you believe you should be selected</li><li>• How the selected program(s) align(s) with your professional development plans</li></ul>			
Applicant Signature		Date	



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### SECTION III: LEADERSHIP COMPETENCY DEVELOPMENT CAPABILITIES

Instructions: In the following sections, provide information on how you have developed your leadership competencies. Applicants are expected to have prior training and/or experiences that have prepared them for a leadership program. Do not exceed the space provided in the text boxes.

**A. Leadership Training and Programs:** Describe all leadership training, leadership programs and/or other formal training that has prepared you for a formal leadership program. Include the name of the course/program, course vendor/sponsor/institution, length of course/program, and date completed as well as leadership competencies developed. Explain how you have applied these leadership competencies to your position(s).

[Continued on next page.]



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**B. Developmental Activities and Experiences:** Describe other activities and experiences that have contributed to the development of your leadership competencies (i.e. mentoring, rotational assignments, team lead assignments, self-development efforts, professional memberships and associations, volunteer work). At a minimum, address at least 5 of the competencies provided from the NAVFAC Workforce Development Continuum ([linked here](#)) and explain how these developmental activities and experiences contributed to your leadership development.

**C. Other Accomplishments:** Describe other notable achievements of your career (i.e. certifications, licenses, recognition and awards, completion of an entry-level or other career development program(s), apprenticeship and educational programs). Explain how these achievements have contributed to your leadership development.

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## SECTION IV: SUPERVISOR ENDORSEMENT

Instructions: Section IV and V of this form must be completed by different individuals. If the applicant's Supervisor and Senior Management Sponsor are the same person, a second-level supervisor must complete this section.

Applicant Name:	Applicant Work Phone:
Supervisor Name:	Applicant Work E-mail:

Instructions: In 250 words or less, provide an assessment of the applicant's leadership potential and how their participation in a leadership program will benefit NAVFAC and the applicant.

Patient Information	
Name	
Age	
Sex	
Address	
City	
State	
Zip	
Phone	
History of Present Illness	
Onset of symptoms	
Duration of symptoms	
Frequency of symptoms	
Severity of symptoms	
Associated symptoms	
Previous treatments	
Response to treatment	
Family History	
Social History	
Physical Examination	
Vital Signs	
General	
Head	
Eyes	
Ears	
Nose	
Throat	
Heart	
Lungs	
Abdomen	
Genitourinary	
Neurological	
Musculoskeletal	
Skin	
Laboratory Tests	
Blood	
Urine	
Stool	
Other	
Imaging Studies	
X-ray	
Ultrasound	
CT Scan	
MRI	
Other	
Diagnosis	
Treatment Plan	
Medications	
Surgery	
Other	
Follow-up	
Patient Education	
Referral	

Indicate your level of agreement with the following statement by choosing one of the options below.

*This applicant has the potential to be successful in a leadership program.*

Strongly Agree	Agree	Neither Agree / Disagree	Disagree	Strongly Disagree
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Supervisor Signature \_\_\_\_\_ Date \_\_\_\_\_



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### SECTION V: SENIOR MANAGEMENT ENDORSEMENT

To be completed by Senior Management Sponsor listed in Section I. Return to the applicant to submit as part of the application package.

Applicant Name:	Applicant Work Phone:
Senior Management Sponsor Name:	Applicant Work E-mail:
<p>Instructions: In 250 words or less, provide an assessment of the applicant's leadership potential and how their participation in a leadership program will benefit NAVFAC and the applicant.</p>	
<p><input type="radio"/> I concur with the supervisor's recommendation and fully support this applicant's participation in a leadership program.</p> <p><input type="radio"/> I am unable to support this applicant's participation in a leadership program.</p>	
Senior Management Sponsor Signature	Date