MMANH Local Government Management Fellowship Municipal Application—2018

<u>Instructions:</u> Please enclose this complete application and all supporting documentation into <u>one</u> <u>PDF file</u> using your community's name as the file title and email to Carlos P. Baía at cbaia@concordnh.gov by the end of business on Friday, April 13th.

If you have any questions regarding this application, please contact Carlos P. Baía, Deputy City Manager for Development, City of Concord, (225-8595 or cbaia@concordnh.gov). Municipality: Mailing Address: Manager/Administrator: Phone/Fax: E-mail: Please attach a brief narrative outlining the following relevant points to this application: 1) Describe the resources that will be available to the student over the course of the fellowship. This can include resources such as office space, computer equipment, internet access, informational resources, staff support, among other resources. 2) Describe the supervision the student will receive. Who will be the supervisor? How frequently will work be reviewed? How much time does the supervisor have to dedicate to the student? List any supervisory duties that the student will be tasked with. Are these responsibilities at the appropriate level for a graduate student or young professional? 3) Describe any projects that you intend the student to work on during the tenure of the fellowship. Ideally there will be several minor projects so the student can gain broad experience and one major project for specialization in a topic relevant to local govt. management. If you have one, please attach a job description or position description including duties and daily responsibilities that the fellowship will entail. 4) Please describe any mentoring the student will receive from the manager/administrator. This can include discussing career options in the local government management field, inviting the student to observe otherwise closed meetings and debriefing with the manager afterwards, attending after-hours meetings or social events with the manager, and other activities. I confirm that I understand the cost sharing formula for the fellowship and will have adequate funds available to fund the full term of the fellowship I am applying for.

Date

Signature of Manager/Administrator