

DEFENSE CIVILIAN EMERGING LEADER PROGRAM (DCELP) SUPERVISOR ASSESSMENT

This part is to be completed by the nominee's immediate supervisor who is thoroughly familiar with his/her performance in order to assess his/her leadership potential.

Nominee's Name: _____

Current Position: _____

Current Position level: **Employee** **Team Leader**
 Intern **Member of Fellowship Program**

Please rate the nominee's PROFICIENCY in each of the following competencies:

Competencies	Current Proficiency		
	Needs Development ¹	Proficient ²	Outstanding/ A Personal Strength ³
Interpersonal Skills			
Integrity/Honesty			
Written Communication			
Oral Communication			
Continual Learning			
Public Service Motivation			
Leveraging Diversity			
Flexibility			
Resilience			
Computer Literacy			
Problem Solving			
Customer Service			
Technical Credibility			
Mission Orientation			
Team Building			
Decisiveness			
Influencing/Negotiating			
DoD Mission and Culture			

¹ Applies the competencies in somewhat difficult situations; requires frequent guidance.

² Applies the competencies in difficult situations; requires only occasional guidance.

³ Applies the competencies in exceptionally difficult situations; serves as a key resource and advises others.

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Supervisory Narrative

In at least 250 words, provide a narrative that cites your unique perspective on the nominee's proficiencies indicated above.

Supervisory and Leadership Endorsement

Based on my personal experience and discussions with this nominee, knowledge of his/her current/past performance, and review of his/her application package, this nominee is:

Ready Now Ready in 1 year upon DCELP Completion Other (Please explain)

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Immediate Supervisor Title: _____

Immediate Supervisor E-mail: _____

Immediate Supervisor Phone: _____

Immediate Supervisor Signature Date

Second Level Supervisor Title: _____

Second Level Supervisor Signature Date

Understanding of Program Requirements

I have read and understand the DCELP program requirements and acknowledge some requirements may involve time during regular duty hours to complete. I have also spoken with my organizational/Component leadership to ensure they understand these requirements as well.

Nominee's Signature Date

Supervisor's Signature Date