

**LEADERSHIP MEADE COUNTY  
APPLICATION INFORMATION**

Leadership Meade County participants will be selected by a review committee on the basis of completed applications which must be returned by August 18, 2017.

Preference will be given to candidates who, in addition to their potential for leadership, would contribute to the overall diversity and strength of the class and have available time and resources to commit to the program and future community service. The class is limited to fifteen individuals.

**REQUIREMENTS FOR SUCCESSFUL PARTICIPATION**

The nine month program runs from September 2017 through May 2018. May has one day session and May Chamber Luncheon for the recognition of the graduating class. It is necessary for the following requirements to be met in order for a participant to graduate:

**Participation in the Program Sessions.**

Sessions are held once a month for a total of 9 sessions, including the Opening Session. Attendance at each of these sessions is mandatory. Except in truly unavoidable situations, punctuality and maintaining presence for the entire session is required. Where a personal or business emergency arises, the participant is required to make up any missed sessions. Under no circumstances may a participant miss any portion of the Opening Session. Failure to attend the entire Opening Session will make it impossible for a participant to continue in the program.

**Tuition for Leadership Meade County is \$300.** Applicants will be billed for the tuition upon their acceptance into the program. The tuition may be paid by the individual, employer, agency, organization or other source. Partial scholarships are available to individuals who may not otherwise be able to participate. (Please attach a letter to this application expressing your need.)

**These items should be submitted by each candidate:**

1. Application form.
2. Resume listing history, positions held and community service details.
3. Letter of Recommendation
  - Candidates presenting themselves independently as private individuals should submit a letter of recommendation from a community figure (religious/political/professional).
  - Candidates from sponsor/employer organizations should submit a letter of recommendation from that organization.

*We have read the above outlined requirements for successful participation in the Leadership Meade County Program and agree to meet all the requirements.*

\_\_\_\_\_  
Participant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Immediate Supervisor's Signature

\_\_\_\_\_  
Date

**Return the required application materials by August 18, 2017 to Meade County Chamber of Commerce, PO Box 483, Brandenburg, KY 40108.**

Application form must be attached.

# Meade County

## ~ Confidential Application ~

### Personal Information:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

### Employment:

Current Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Business Phone & Ext. \_\_\_\_\_

Business Email: \_\_\_\_\_

Years Employed \_\_\_\_\_

(If less than one year, list last employer): \_\_\_\_\_

Current Title: \_\_\_\_\_

Current Responsibilities: \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_

Supervisor's Email: \_\_\_\_\_

**References:** Please provide 2 professional references. Include a separate letter from each reference.

Name	Address	Telephone

### Education: (Include trade schools or other specialized training/education)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

General:

How did you learn about this program? \_\_\_\_\_

Number of years you have lived and / or worked in Meade County area: \_\_\_\_\_

List all community organizations in which you are involved (civic, professional, church, business, etc.) \_\_\_\_\_

What are 3 personal or professional strengths you will bring to the group? \_\_\_\_\_

What 3 areas in your personal or professional development would you like to grow further? \_\_\_\_\_

What do you consider your highest responsibility, skill or career achievement to date? \_\_\_\_\_

What do you hope to gain from your participation in the Leadership Meade County program? \_\_\_\_\_

Payment method: How do you plan to pay for the tuition?

- Paid by myself
- Employer will pay
- Will need assistance or scholarship (submit one page letter with this application to explain your request for assistance.
- Please invoice me for the tuition at the following address:

\_\_\_\_\_

Applications will be available by May 18, 2017. Payment will be due in full by August 30, 2017. Openings in each class are limited a minimum of 10, or maximum of 15 students. Class could be postponed to following year if necessary due to size. (Payments will be returned if held over.)

Information Needed:

◆ Name on Name tag: \_\_\_\_\_

◆ Name on Diploma: \_\_\_\_\_ (Please provide a professional photo)

◆ Company Logo: Please email your company logo to [clogsdon@meadekychamber.org](mailto:clogsdon@meadekychamber.org) for use on Chamber website and other marketing materials.

◆ I agree that Meade County Chamber of Commerce may use such photographs of me with or without my name and for any lawful purpose, including such purposes as publicity, marketing, illustrations, advertising, and web content.     YES     NO

## Attendance and Waiver Policy

**Leadership Meade County (LMC) expects all students to commit to attending all sessions.** Students are required to attend classes regularly. Unless otherwise stated at the beginning of the course, a student missing more than TWO (2) of the class sessions for any reason will be withdrawn from the program without a refund on the tuition.

If your employer will be paying the tuition, or you will be absent from work while attending the sessions, your employer or authorized representative needs to acknowledge his/her commitment to the LMC program by signing below.

**Commitment:** I understand the purpose of the Leadership Meade County program and if selected I will devote the time and resources necessary to complete the program.

I understand that by missing two of the sessions, I will be asked to withdraw from the program and no portion of the tuition shall be refunded. I understand the above commitments and agree to be bound by them in signing this application.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Employer's Signature \_\_\_\_\_ Date \_\_\_\_\_

All consideration for being permitted by the Meade County Chamber of Commerce Leadership Meade County (LMC) program to participate in the Leadership Program, I forever release the LMC, the Meade County Chamber of Commerce, any LMC affiliated organization, and their respective directors, officers, employees, volunteers, agents, contractors, and representatives (collectively "Releasees") from any and all actions, claims, or demands, for injury, death, or property damage, related to my participation on the respective dates of the class, and will not make a claim against, sue, or attach the property of any Releasees in connection with any of the matters covered by the foregoing release which occurs during a Leadership class

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Meade County Chamber of Commerce  
79 Broadway  
Brandenburg, KY 40108

Telephone: 270-422-3626  
Email: [clogsdon@meadekychamber.org](mailto:clogsdon@meadekychamber.org)