## LEADERSHIP CLASS APPLICATION

## **CONTACT INFORMATION**

| Full name:                                  | Preferred Name:   |  |  |
|---|---|--|--|
| Date of Birth:                              |   |  |  |
| Home Address:                               |   |  |  |
| City:State                                  | :Zip:   |  |  |
| Phone: Email:                               | : Zip:  |  |  |
| Business / Employer Name:                   |   |  |  |
| Address:                                    |   |  |  |
| City: State                                 | :Zip:   |  |  |
| Work Phone:                                 |   |  |  |
| Preferred Method of Contact: Ema            | ail Phone Text   Home/Business                                      |  |  |
| How long have you worked for your co        | urrent employer?  |  |  |
| One interesting fact about yourself: _      |   |  |  |
|   |   |  |  |
| ACHIEVEMENTS                                |   |  |  |
| Please list any extracurricular activities  | es, l <mark>eadership po</mark> sit <mark>ions held,</mark> special |  |  |
| honors, a <mark>nd awards r</mark> eceived. |   |  |  |
|   |   |  |  |
|   |   |  |  |
|   |   |  |  |
|   |   |  |  |
|   |   |  |  |
| What do you consider to be your high        | est career achievement to date?                                     |  |  |
|   |   |  |  |
|   |   |  |  |
|   |   |  |  |

## **VOLUNTEER ACTIVITY**

| Please list your volunteer work; including a                                      |  |
|---|--|
| political, social, athletic, business/profess involved in your main role in each. | nonar or other activities you were             |
| Organization  | Position/Role                                  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
| How much time each month do you commi   | it to vo <mark>lunte</mark> er work?           |
| What areas of interest do you have for cui  | rrent o <mark>r future volunteer wor</mark> k? |
|   |  |
|   |  |
| GENERAL INFORMATION   |  |
| What do you feel are the top three issues   | facing Tahlequah? Please                       |
| explain a <mark>nd list any ide</mark> as you have for reso                       | olving these issues.                           |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
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|   |  |
|   |  |

## EMPLOYER UNDERSTANDING AND CONSENT

This candidate has my full support to participate in the 2024–2025 Tahlequah Area Chamber of Commerce – Leadership Tahlequah Class 27. I am aware of the time commitment involved in his/her effective participation, as well as the financial obligation. (Should be signed by the owner or CEO, if other than the applicant.)

| Name:                           |  |
|---------------------------------|--|
| Title:                          |  |
| Organization:                   |  |
| Address:                        |  |
| Phone:                          |  |
| Signature:                      |  |
| Date:                           |  |
|                                 |  |
| Office Use Only                 |  |
| Date Received: Check #: Amount: |  |