



Leadership Caldwell

Confidential Application



Saint Alphonus

The mission of Leadership Caldwell is reflected in its goals.

- To develop awareness of the Caldwell area, its strengths, challenges and opportunities
- To enhance leadership abilities
- To create a network of informed, concerned leaders.
- To encourage greater involvement in the community.

Personal Data:

Last *First* *M.I.*

Home Address

City/State/ZIP *Home Phone*

Business/Organization

Business Address

City *State* *ZIP*

Business Phone *Fax* *Email*

Name of President/CEO/Business Owner

Current Position/How long with Company

Sponsoring Organization (if different from business)

Address

City/State/ZIP

Phone *Name of President/CEO/Business Owner*

Education & Experience

State your educational and professional background including degrees awarded, field(s) of study, professional experience, institutes, training programs, etc. (You may attach a resume or separate sheet to answer the question.)

Tuition

Tuition for the Leadership Caldwell program is \$ (600) per participant. Tuition covers all program costs, meals and materials. Tuition is due in full by August 1st unless prior arrangement have been made.

_____ **Full tuition of () can be paid**

References

List two persons who have knowledge of your qualifications to be a Leadership Caldwell participant.

1. Full Name & Title

Phone

Business or Home Address

City

ZIP

2. Full Name & Title

Phone

Business or Home Address

City

ZIP

Employer Authorization

Full support from the applicant’s employer is necessary to be able to effectively participate in Leadership Caldwell. I have approved the submission of this application and the time and any financial commitment required on our part for the applicant to participate in Leadership Caldwell. I have read and understood the Cancellation & Refund Policy stated on the following page.

Employer Signature

Date

Cancellation & Refund Policy

- Cancellation must be made in writing and received by the Leadership Caldwell Administrator by 5:00 p.m. on the dates specified below.
- Cancellation on or before August 1 will be given a full refund of any tuition paid.
- Cancellation after August 1 but two days prior to the class orientation will be given a 50% refund of the full tuition amount.
- Cancellations any later than the above will be given no refund. Any candidate who misses the class orientation will be dropped from the class and will still be responsible for the full tuition amount.
- Even though circumstances do arise, any participant missing more than two sessions may not graduate with the class, and no portion of tuition will be refunded.

Goals

Please identify and discuss a particular issue, opportunity, or problem you feel is crucial to the Caldwell area. Be prepared to discuss during your oral interview.

How would you expect to use your Leadership Caldwell experience?

What can you contribute to the program?

Community Involvement

Please list the civic activities that you have participated in during the last five years. For each activity, indicate the nature of your participation. If you have not been involved in any civic activities, please explain why.

Organization/Activity	Involvement
Organization/Activity	Involvement
Organization/Activity	Involvement
Organization/Activity	Involvement
Organization/Activity	Involvement

Commitment

In order to accomplish Leadership Caldwell's objectives, the full commitment and participation of each individual selected is necessary. Participants are expected to attend all sessions including.

- 1) Orientation—scheduled August 29, 2019 (mandatory attendance)
- 2) One full weekday each month on the fourth Thursday from September to May (November 3rd Thursday of month, December 3rd Thursday of month, March 2020 3rd Thursday of the month)
- 3) Graduation Program— Chamber luncheon Tuesday, May 12, 2020
- 4) Community experiences required independent of class sessions.

If selected I am fully prepared to be an active participant and devote the time and energy required to complete the Leadership Caldwell program. I have read and understood the Cancellation and Refund Policy.

Applicant Signature

Date



Application Deadline

Application must be received at The Chamber by July 5, 2019 All applicants must participate in a personal interview with the Selection Committee. NOTE: DO NOT SEND TUITION WITH APPLICATION.

The Caldwell Chamber of Commerce
704 Blaine St.,
Caldwell, ID 83605

Phone: (208) 459-7493

Email: thardin@caldwellchamber.org

Website: www.caldwellchamber.org



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NAMPA HEALTH FOUNDATION