

Application Deadline: June 19, 2023

The selection committee will choose participants based on the responses to the following questions. Please answer them as completely as possible.

Applicant Information					
Full Name:	Preferred Name	e:	E-mail: _		
Company:	Your Job Title: _				
Work Address:	City:		State:	Zip:	_
Work Phone:	Cell Phone:				
Home Address:	City:		State:	Zip:	-
Program Participation & Re	eferences				
Who will pay your tuition?					
○ Me O My employer	O Sponsoring organization		Scholarship requested (Include request letter)		
List your supervisor and at lea	st one other reference w	ho may be	contacted by	the selection o	ommittee.
Supervisor Name:	Company:				
Title:	Phone:		Email:		
Reference Name:	Company:				
Title:	Phone:				
<u>Signatures</u>					
Signature of Applicant		Date			
Signature & Title of Applicant's Sp	onsor (if appropriate)	Date			

Continue to Application Questions













Applicant Questions

1.	State your professional and educational background or enclose a resume. You also may list professional affiliations, community, religious, athletic and social organizations with which you have been or are currently involved.		
2.	Describe a professional or community leadership challenge you have undertaken; or, describe how you would like to involve yourself in future challenges.		
3.	How do you hope to contribute to the Leadership Austin class?		



Applicant Questions

4.	In what ways do you think LEADERSHIP AUSTIN can help you develop your leadership potential? What do you expect of the program?
5.	Identify and discuss an issue that you feel is critical to leadership within the community of Austin
6.	Do you have the time and willingness to commit to the Leadership Austin program? <u>Please note:</u> Participants are expected to attend all sessions.