



## Application Deadline: June 7, 2024

The selection committee will choose participants based on their responses to the following questions. Please answer them as completely as possible on a separate printed page. **(Attach answers to your completed application form and submit two copies of all application materials.)**

### Applicant Questions

1. State your professional and educational background or enclose a resume. Include degrees awarded, fields of study, professional institutes, training programs, etc. 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, if you have not participated in professional or community activities, explain what has changed that will allow you to be involved in the future.
3. What would you contribute to the LEADERSHIP AUSTIN class?
4. In what ways do you think LEADERSHIP AUSTIN can help you develop your leadership potential? What do you expect of the program? (Please submit approximately half a printed page.)
5. Identify and discuss an issue that you feel is critical to the LEADERSHIP AUSTIN. (Please submit approximately half a printed page.)
6. Do you have the time and willingness to commit to the Leadership Austin program? **Please be aware that if a participant has more than one absence, they may be asked to leave the program with no refund.**

### Program Participation

#### Who will pay your tuition?

- ☐ Me    ☐ My employer    ☐ Sponsoring organization    ☐ Scholarship requested  
(Include request letter)

### Contact Information

Full Name: \_\_\_\_\_ Preferred Name: \_\_\_\_\_ E-mail: \_\_\_\_\_

Company: \_\_\_\_\_ Your Job Title: \_\_\_\_\_

Work Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

List your supervisor and at least one other person/reference who may be contacted by the selection committee.

Supervisor Name: \_\_\_\_\_ Company: \_\_\_\_\_

Title: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Reference Name: \_\_\_\_\_ Company: \_\_\_\_\_

Title: \_\_\_\_\_ Phone: \_\_\_\_\_

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Signature & Title of Applicant's Sponsor (if appropriate) \_\_\_\_\_ Date \_\_\_\_\_

Return two copies of completed form, responses, and supporting attachments to:

LEADERSHIP AUSTIN, Austin Area Chamber of Commerce, 329 North Main Street, Suite 102, Austin, MN 55912



**Application Deadline: June 7, 2024**

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-mail: \_\_\_\_\_

Company: \_\_\_\_\_ Your Job Title: \_\_\_\_\_

Work Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

## Program Participation & References

## Who will pay your tuition?

☐ Me      ☐ My employer      ☐ Sponsoring organization      ☐ Scholarship requested  
(Include request letter)

**List your supervisor and at least one other reference who may be contacted by the selection committee.**

Supervisor Name: \_\_\_\_\_ Company: \_\_\_\_\_

Title: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Reference Name: \_\_\_\_\_ Company: \_\_\_\_\_

Title: \_\_\_\_\_ Phone: \_\_\_\_\_

## Signatures

Signature of Applicant	Date
------------------------	------

Signature & Title of Applicant's Sponsor (if appropriate) \_\_\_\_\_ Date \_\_\_\_\_

**Continue to Application Questions**

- ### 3. What would you contribute to the LEADERSHIP AUSTIN class?

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 the LEADERSHIP AUSTIN.
6. Do you have the time and willingness to commit to the Leadership Austin program? Please note: If a participant has more than one absence, they may be asked to leave the program with no refund.