

**Winchester-Clark County Chamber of Commerce**  
**Leadership Winchester Application**

**PERSONAL INFORMATION:**

Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Name of Spouse \_\_\_\_\_

Home Address \_\_\_\_\_ Phone \_\_\_\_\_

Place of Employment \_\_\_\_\_ Phone \_\_\_\_\_

Work Address \_\_\_\_\_ Phone \_\_\_\_\_

Email Address \_\_\_\_\_

How long have you lived in Winchester/Clark County? \_\_\_\_\_

How long have you worked in Winchester/Clark County? \_\_\_\_\_

**EDUCATION:**

Name and City of School	Date (From-To)	Degree	Major
_____	_____	_____	_____

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Extracurricular Activities and Special Honors or Awards for Leadership Activities

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**EMPLOYMENT:**

Present Employer \_\_\_\_\_ Date Began \_\_\_\_\_

Present Title and Responsibility \_\_\_\_\_

How many days per month does your work require you to be out of town? \_\_\_\_\_

To meet graduation requirement attendance at eight one-day sessions is mandatory.  
Are you and your employer willing to make such a commitment? \_\_\_\_\_

Previous Employment (In reverse chronological order):

Employer	Title or Responsibility	From	To
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

What do you consider your highest responsibility, skill or achievement (career or personal)? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**ORGANIZATIONS AND ACTIVITIES:**

(Please list, in order of importance to you, up to five community, civic, professional, and other organizations in which you are or have been a member):

Organization	Approximate Dates of Membership	Position Held
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

What have you accomplished in these activities that you think is important?

\_\_\_\_\_

\_\_\_\_\_

How much time each month do you commit to community, civic, professional and other organizations and activities? \_\_\_\_\_

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**TUITION AND FUNDING:**

If accepted into the Leadership Winchester program, you and your company (sponsor) will be billed for the tuition fee of \$500.00 which covers all program costs. However, if you have no sponsor and you would not be able to participate for financial reasons unless you receive a scholarship, please indicate below:

\_\_\_\_\_ I ask to be considered for a half-tuition scholarship based on the following reason:

\_\_\_\_\_

\_\_\_\_\_ I ask to be considered for a full scholarship based on the following reason: \_\_\_\_\_

\_\_\_\_\_

**GENERAL:**

What do you hope to gain from participation in the Leadership Winchester? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

In your judgment, what are the three most important pressing problems facing the area today? Explain why and provide any recommendations for approaching and resolving these problems.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**REFERENCES:**

Name/Title \_\_\_\_\_ Name/Title \_\_\_\_\_

Business Address \_\_\_\_\_ Business Address \_\_\_\_\_

Phone \_\_\_\_\_ Phone \_\_\_\_\_

*All applications are subject to confidential evaluation. If you are not selected to participate in this year's Leadership Winchester class, your biographical data will be retained for future consideration.*

*If I am selected I will devote the time and resources necessary to complete the program. Even though emergencies do arise, any participant missing more than one session for whatever reason may be asked to withdraw from the program and no portion of the tuition shall be refunded*

*TO GRADUATE FROM LEADERSHIP WINCHESTER, A PARTICIPANT MUST ATTEND ALL EIGHT DAY-LONG SESSIONS. PARTICIPANT SHOULD PLAN ON EACH SESSION LASTING FROM 8:00 AM UNTIL 5:00 PM. EXCEPTIONS TO THE SCHEDULE MUST BE ACCOMPANIED BY A NOTE FROM A PARENT, TEACHER, OR EMPLOYER IN ORDER TO BE EXCUSED.*

*A \$50 NON-REFUNDABLE APPLICATION FEE MUST BE SUBMITTED WITH THE APPLICATION TO BE CONSIDERED FOR THE PROGRAM. IF ACCEPTED INTO THE CLASS, YOUR FEE WILL BE DEDUCTED FROM THE TUTION FEE.*

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**Signature**

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**Date**