



Class of 2019 Application Application Deadline – July 13, 2018

Name: _____
Last First MI

Home Address: _____
Street City State Zip

Home Phone: () _____ Email: _____

How did you become aware of Leadership Bedford County? _____

CURRENT WORK INFORMATION

Business Name: _____

Business Address: _____
Street City State Zip

Business Phone: () _____ Email: _____ Fax: _____

Current Position/Title: _____ Years of Service: _____

Briefly summarize your current job responsibilities.

COMMUNITY INVOLVEMENT

Please list in order of importance three organizations (i.e. community, civic, professional, religious, social, athletic, etc.) in which you are or have been a member during the past five years. Also list any leadership positions and/or significant contributions.

Name of Organization	Approximate Dates of Membership	Involvement
----------------------	---------------------------------	-------------

1.

2.

3.

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

_____ hours each month

Why do you want to participate in Leadership Bedford County and what do you hope to gain from the program?

What do you consider your most important volunteer service accomplishment to date and why?

EDUCATION/TRAINING

Degree(s)	Institution	Dates of Attendance
-----------	-------------	---------------------

Please list any seminar or training you have attended in the past two years regarding leadership, management, or community service topics.

Title	Date	Location
-------	------	----------

COMMITMENT

Attendance at a 2-day retreat in September, the third Wednesday of every month from October through May and a graduation program in June are mandatory. Persons who cannot adjust their schedules to accommodate these days should not apply. Class members are expected to attend each day session in its entirety. Are you and your employer willing to make such a commitment?

☐ Yes ☐ No

Full tuition (\$1,500.00) is due prior to the Retreat for applicants who are selected and will be paid by:

☐ Me personally ☐ My employer ☐ Organization sponsoring me

Do you need to be considered for partial financial assistance? ☐ Yes ☐ No

*** If yes, provide a statement of why help is needed.**

Do you prefer to be contacted ☐ At home ☐ At work

Signature: _____ Date: _____

Leadership Bedford County, a program sponsored by Bedford County Chamber of Commerce, adheres to EEOC guidelines and will not discriminate against individuals based on race, color, religion, sex or national