Leadership Whitley County Application

Application Criteria of Interested Applicants

- o A demonstrated ability to achieve personal goals
- o A ready availability of time and resources to commit to community service
- o A demonstrated personal commitment to the Whitley County community



Applicants should live or work in Whitley County. Applicants should have the full support of the organization or business they represent. Participants are expected to attend at least 80 percent of the sessions from October through March. Absences or lack of participation may result in termination from the class. *Attendance at the retreat in September and celebration are mandatory.*

Applications must be signed by the candidate and employer. The deadline for all applications is **June 30**, **2023**. Notification of acceptance into the program is by August 1, 2023.

| This mailing address, email and phone County (LWC) if you are admitted. | will be the one used | d to contact you during Leadership Whitley |
|---|----------------------|---|
| Name: | | |
| Mailing Address: | | |
| City: | State: | Zip Code: |
| Email: | | Phone: |
| Years of Work or Residency in Whitley | County: | |
| The following information is used to di | versify the group: | |
| Date of Birth (mm/dd/yyyy): | | |
| Gender (circle): Male | Female | |
| Education: | | |
| Job Title: | | |
| Current Employer: | | |
| Employer Address: | | |
| City: | State: | Zip Code: |
| Name of Immediate Supervisor: | | |
| Check the category which best described Community/Nonprofit Government Healthcare Education | oes the area in whic | h you presently work/serve: Manufacturing Finance Other: |
| Most Prior Employer: | | |
| Number of Years Worked at Most Prior | r Employer: | |

Community Involvement Please list organizations in which you are involved, responsibility and length of time you have participated. If you are not currently involved with community activities, please list your area(s) of interest: What do you consider to be your most important community service responsibility to date? **General Information** What do you hope to gain from participation in LWC and how do you expect to utilize your experience? How did you hear about the LWC program? If you heard about LWC from an alumni, please write their name on the "other" line. ☐ Social Media ☐ Employer ☐ Co-worker ☐ Friend Other _____ **Tuition** Tuition is \$850 per participant. The participant, employer or a financial sponsor may cover tuition. If accepted into the program, a tuition invoice will be mailed by Aug. 15. 2023. Please do not send in tuition until you receive the invoice. Tuition invoice should be sent to: Name:

Note: If an applicant voluntarily withdraws from the program prior to Sept. 1, 2022, 100 percent of the tuition is refundable. If they cancel their participation between Sept. 1 and the retreat, 50 percent of the tuition will be refunded. Following the retreat, tuition is non-refundable. The sponsoring entity may elect to send another representative through the program, provided the selection is made prior to the retreat. If special circumstances (i.e. serious illness) surround the applicant's withdrawal, it can be presented to

City:______ State: _____ Zip: _____

Company: ___

Mailing Address: _____

the Whitley County EDC on a case by case basis.

Personal Commitment

Business or Organization Commitment

| This applicant has my full support to participate in LWC. I am aware of the time commitment involved, as well as the financial obligation. |
|--|
| Supervisor Name (Printed): |
| Title: |
| Business/Organization: |
| Email: |
| Signature: |
| Date: |

Submit Application Instructions

Please submit your completed application electronically or via mail and any questions to:

Kennedy Saggars

Whitley County EDC / LWC Marketing Director wc@whitleyedc.com or 260.244.5506 220 W Van Buren St. Suite 102 Columbia City, IN 46725