

LEADERSHIP

Clay

Class of 2019

A Program of the *Clay County Chamber of Commerce*

Confidential Application

*Application must be submitted to the Chamber of Commerce no later than
December 31, 2018. Attach additional sheets as necessary.*

Name: _____ Home Phone: _____

Home Address: _____

Name of Spouse: _____ # of Children: _____

Years as resident of Clay County: _____

Education (School/Degrees/Diplomas) _____

Have you participated in a Leadership program in another community? _____ If so, please describe.

PARTICIPATION

Graduation for *Leadership Clay* requires attendance at the Orientation and Retreat, Graduation Banquet, River's Edge Toastmasters, one Clay County Council/Commission meeting, one Clay County School Board meeting, no more than two absences from the regular program-training days, and participation in a class community service project.

Do you commit to fulfilling this time requirement? ___ Yes ___ No

EMPLOYMENT

Employer: _____ Title: _____

Phone: _____ Cell Phone: _____

Fax: _____ Email: _____

Mailing Address: _____ Zip: _____

Number of years in present position/occupation: _____

Please tell us a little about yourself, such as past employment, extracurricular honors, education and special interests.

COMMUNITY INVOLVEMENT

Please list any community activities, which you've been involved whether civic, professional, business, religious, social, athletic, or other.

Organization	Years as a Member	Position held

What have you accomplished in any one or more of these activities that you think is important or has helped you develop and/or express your leadership skills?

LEADERSHIP/MANAGEMENT TRAINING

Please elaborate below on any management or leadership training you have received in the past.

What do you consider to be your major strengths and qualifications for the *Leadership Clay* Program?

What do you hope to accomplish by your participation in the *Leadership Clay* program?

ISSUES/OPPORTUNITIES

Identify what you believe to be the three most important issues and/or opportunities facing our community:

- 1) _____
- 2) _____
- 3) _____

How would you expect to utilize your *Leadership Clay* experience to address these issues?

How did you hear about the *Leadership Clay* Program?

TUITION/COMMITMENT

Tuition for each participant in *Leadership Clay* is \$1000.00. Chamber members receive a \$200.00 discount and pay \$800.00. Non-profit members pay \$700 (limit of two). If selected, the full tuition is due by January 13, 2019. I understand the purpose of the *Leadership Clay* program, and if selected will devote the time to complete the program. If for any reason an individual withdraws from the program or is otherwise unable to complete the full program year, they may be offered the option of completing a program day or days during the following program year, but no refunds of tuition will be issued. I further understand that I may not be selected to participate in the program and agree not to hold anyone liable for not selecting me into the program.

Signature: _____ Date: _____

Submit application by **December 21, 2018** to the Chamber of Commerce, 1845 Town Center Blvd Ste 410
Fleming Island, FL 32003 or fax to (904) 264-0070

Attention: Tresa Calfee (904) 264-2651 x203 - tcalfee@claychamber.com