



LEADERSHIP BOZEMAN 2011-2012 APPLICATION

NAME _____ TITLE _____
(as you wish it to appear on name tags & class list)

BUSINESS OR ORGANIZATION (IF ANY) _____

BUSINESS MAILING ADDRESS _____ CITY/STATE/ZIP _____

BUSINESS PHONE # _____ FAX# _____

E-MAIL ADDRESS _____

NAME OF SUPERVISOR _____ TITLE _____

WHERE SHOULD INFORMATION BE MAILED? BUSINESS _____ HOME _____

IF HOME: ADDRESS _____

CITY/STATE/ZIP _____ PHONE _____

1. Leadership Bozeman **REQUIRES** participation in 10 sessions one Wednesday of each month, from August through May and participation in a group community service project throughout the year. No more than two absences are allowed. The orientation will be held Wednesday, August 17, 2011. You are also required to serve as a resource/planning person for at least one session during next year's program.

If selected, can you devote the required time to the program?

YES

NO

2. How do you think Leadership Bozeman can help you fulfill your own aspirations as a leader in the Bozeman area?

3. List three major opportunities and challenges you see facing the Bozeman area.

Opportunities

a.

b.

c.

Challenges

a.

b.

c.

4. Please identify and discuss a particular challenge(s) on which you feel Leadership Bozeman should focus during the coming year.

5. Leadership Bozeman sessions do include walking tours that can be long or outdoors. Please indicate if you are able to participate in such tours.

YES _____ NO _____

If not, we will do our best to plan the days to take into account any physical limitations.

6. Dietary Restrictions/Preferences:

7. List the major social, business and professional activities in which you have participated during the past five years. List any award or special recognition that you have received and indicate for each activity the nature of your participation including any office you have held.

8. Please list any professional leadership training you have received:

9. How did you hear about the Leadership Bozeman program:

_____ from a previous participant _____ through my company
_____ from the media _____ through a club or organization
_____ from a friend _____ other: _____

10. Please attach a resume or other statement of educational background and work experience.

I understand that Leadership Bozeman will meet at least on full day each month, September through May and will also include an all-day retreat on August 17th and an overnight retreat and graduation ceremony in May 2012. I also understand that the tuition for Leadership Bozeman 24 is \$995 per participant for Chamber members and \$1295 for non-Chamber members. If I am chosen as a participant, I will consider this a firm commitment to complete the program, **WITH NO MORE THAN TWO ABSENCES AND I UNDERSTAND NO REFUNDS WILL BE GIVEN. FULL PAYMENT, PROFESSIONAL PHOTOGRAPH AND A ONE PARAGRAPH BIOGRAPHY** are required by 8/8/2011. I understand that these requirements are mandatory upon acceptance to Leadership Bozeman 24. *The Leadership Bozeman selection process does not discriminate against any person regardless of age, sex, race or handicap.*

Signature _____ Date _____
(this verifies that you understand the commitment above)

Employer _____

Supervisor _____ Date _____
(this verifies that your employer has approved your participation in Leadership Bozeman 24)