## **Application Instructions**

- Your completed application will consist of:
  - 1. Pages 1-5 (this top page may be kept for reference)
  - 2. A typed explanation (up to one page) of what you hope to gain from participating in Leadership Franklin County and what you believe you could give back to your community as a graduate of the program
  - 3. A short biography
  - 4. Two reference letters
  - 5. Attached copy of resume.
- Please type your answers. This application is also available at www.atu.edu/ozark/lfc.
- Limit answers to available space if possible. Additional pages may be attached.
- Both the applicant and the applicant's employer or supervisor, if applicable, **must sign** the application and commit to the attendance policy. See *Employer's Commitment*, page 4.
- The application, letters of reference and any other attachments must be received no later than June 30, 2016.
- All applicants will be notified by mail in July 2016.

### **LETTERS OF REFERENCE:**

Two letters of recommendation are required from sources who have observed your leadership skills or potential. The following questions should be provided to your sources and must be addressed in their letters.

#### The two letters of recommendation must answer the following:

- 1. How long have you known the applicant?
- 2. In what capacity do you know the applicant?
- 3. Please describe the applicant in relation to the following criteria:
  - a. Commitment
  - b. Leadership and organizational ability
  - c. Accomplishments as a leader
  - d. Ability to work well with others
  - e. Potential for making a difference in the community
- 4. General comments
- 5. Name of person completing reference
- 6. Date completed
- 7. Telephone number and name of business or organization of person completing reference

You may attach your recommendation letters to your application or have them mailed separately by their authors, or have them e-mailed by the authors directly to mgage @atu.edu. Mail your application to:

Leadership Franklin County Ms. Laura Rudolph, Director c/o Arkansas Tech University-Ozark Campus 1700 Helberg Lane Ozark, AR 72949

#### LEADERSHIP FRANKLIN COUNTY CLASS OF 2016 APPLICATION

Please tab or select with cursor for data entry.

| Date Completed and Maried:  |
|---|
| Applicant Name:   |
| My application includes: (please check each box):   |
| Pages 1-5, completed  |
| A typed explanation of what I hope to gain from participating in Leadership Franklin County and how I will be able to contribute to the community as a graduate of the program. |
| ☐ Two letters of recommendation: ☐ attached OR ☐ being mailed or e-mailed separately  |
| I have: (please check each box):  |
| ☐ I have read the Attendance Requirements and Selection Criteria.   |
| ☐ I have read and signed the Participant Commitment and Pledge.   |
| ☐ I have read and completed the Tuition and Funding section.  |
| My employer or supervisor (if applicable) has:  |
| Signed the Employer's Commitment.   |

### ATTENDANCE REQUIREMENTS

Participants are expected to attend all sessions, however we do realize that emergencies arise where a participant may have to be absent. Any participant missing two full days resulting from any combination of absences can continue with the program, but must make-up one full day the following program year in order to graduate. The make-up session the following program year must cover one of the topics missed the previous year. Any participant missing more than two full days resulting from any combination of absences will automatically be dropped from the program and encouraged to reapply the next program year, and no portion of the tuition will be refunded. Missing any portion of a half-day will be considered a half-day absence. In order to gain full benefit from the program, participants must attend the August and May retreats. Those who are unable to attend these retreats should delay their application to the following year.

Session hours vary slightly, but normally the days begin by 7:45 a.m. and end by 5:30 p.m.

#### **SELECTION CRITERIA**

The goal of Leadership Franklin County is to identify existing or new leaders in the community who can assume a leadership role in determining the future of the Franklin County region.

The Selection Committee will objectively evaluate each applicant's leadership potential, sphere of influence, and demonstrated or expressed interest for constructive involvement in community affairs. The following will be considered in evaluating each applicant:

- Applicant's previous and current involvement in his/her community
- Applicant's involvement in his/her own sponsoring business or organization
- Leadership potential
- Motivation/Attitude
- Education/Training
- Career Background/Work Experience
- Special Consideration (estimated time available for community work, potential for contribution to the community, representation of previously unrepresented segment of the community, ability to help create a more diverse class)

Class size is limited to 25 participants. Applicants are encouraged to reapply if not selected for this year's class.

# ALL APPLICATIONS ARE SUBJECT TO CONFIDENTIAL EVALUATION – CLASS 2017

<u>Please tab or select with cursor for data entry.</u>

| Please type.                          |                    |               |  |  |  |  |
|---------------------------------------|--------------------|---------------|--|--|--|--|
| Last Name<br>Name or Initial          | First Name         | Middle        |  |  |  |  |
| Business Address                      | City/State         | Zip           |  |  |  |  |
| Home Address                          | City/State         | Zip           |  |  |  |  |
| Home Telephone                        | Business Telephone |               |  |  |  |  |
| Cell Phone                            | Spouse's Name      | Spouse's Name |  |  |  |  |
| Names and ages of children:           |                    |               |  |  |  |  |
| *Length of Residence in Franklin Coun | ty:                |               |  |  |  |  |

#### PARTICIPANT COMMITMENT AND PLEDGE

Leadership Franklin County is designed to be a learning experience and requires the following commitment on the part of the participant:

- 1. I fully understand the Attendance Requirements printed on page 1.
- 2. I understand that there will be some activities in addition to the regular sessions (independent activities, meetings, tours, interviews, etc.) in which all participants will be expected to participate.
- 3. I understand that the tuition is \$500 and it is strongly recommended that all participants pay \$100, even if they are sponsored by a business or organization.
- 4. I understand that the full amount of tuition is due to the Leadership Franklin County office no later than September 1, 2016.
- 5. If selected, I will not use contents from the sessions or statements made therein for the purpose of news coverage.
- 6. If selected, I will not use the name of Leadership Franklin County in a political campaign to imply endorsement by Leadership Franklin County.

| Applicant's Signature  |  |
|--|--|
| EMPLOYER'S COMMITMENT  |  |
| An employer must fully support an applicant in employer or supervisor (if applicable) sign the f | his/her participation in the program. Please have your following commitment. |
| This application has the approval of this firm, a time required to participate in the program.   | nd the applicant has our full support, which includes the                    |
| Signature  | Company/Organization   |
| Title  |  |

## **TUITION AND FUNDING**

This page is not viewed during the class selection process.

## All Applicants Please Read:

(Print Name)

Tuition for each participant is \$500, which covers all of the participant's program costs, including meals, transportation, lodging and materials. Tuition is payable by the participant, the employer, or the sponsoring organization.

All Applicants Please Complete the Following Tuition Payment Information:

| How will tuition | be paid? Pleas | e indicate amounts:     |      |  |
|------------------|----------------|-------------------------|------|--|
| Personally       | \$             |                         |      |  |
| Employer         | \$             | Name of Employer:       |      |  |
| Organization     | \$             | Name of Organization: _ |      |  |
|                  |                |                         |      |  |
| Signed           |                |                         | Date |  |
|                  |                |                         | _    |  |