

Name \_\_\_\_\_  
Last First Middle

First Name or Nickname Preferred \_\_\_\_\_

Present Employer \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Cell Phone \_\_\_\_\_  
Street City Zip

Your Title \_\_\_\_\_ Email Address \_\_\_\_\_

Responsibility/Job Description (as you would like listed in program brochure) \_\_\_\_\_

Education (Begin with college(s), advanced degrees and/or specialized training)

Name and location of school	Dates (from-to)	Degree	Major
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Home Address \_\_\_\_\_ Phone \_\_\_\_\_  
Street City Zip

How long have you lived/worked in Eau Claire? \_\_\_\_\_

You are applying as a representative of: *(Please check one of the following)*

☐ Business ☐ Individual ☐ Club/Organization (Name of Club/Organization) \_\_\_\_\_

How did you learn about the program? ☐ Employer ☐ Newsletter ☐ Past Participant ☐ Other

\* Please indicate if there is a specific person we can thank: \_\_\_\_\_

Please list, in order of importance to you, up to three community, civic, professional, business, religious, social, athletic, and other organizations of which you are or have been a member:

Organization	Approximate Dates of Membership	Position Held
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

Please type on a separate sheet of paper your response to the following questions. All responses are kept in strict confidence. (Total responses should not be more than one 8½ x 11 sheet, please.) Your name should be located at the top of the 8½ x 11 sheet of paper.

1. Why are you interested in participating in Leadership Eau Claire™?
2. Identify two issues that you feel are critical to Eau Claire and discuss one of them.
3. Are there any specific community issues or areas of interest you hope the program addresses?

## TUITION

Tuition for the Leadership Eau Claire™ Program is \$1,299 for Chamber members and \$1,499 for non-Chamber members, which covers ALL program costs including meals, transportation, materials and accommodations for the retreat.

**Payment of tuition is required upon acceptance into the program unless prior arrangements are made for a payment plan.**

## TUITION ASSISTANCE

A limited number of partial scholarships may be available to individuals from non-profit organizations or from very small businesses who are otherwise unable to provide tuition. If you need financial assistance, please include a separate letter with this application requesting a partial scholarship and indicate the amount needed and why.

Please check one:

☐ Full Tuition Can Be Paid  
(or)

☐ Scholarship Needed (please submit separate letter of request)

☐ Full Scholarship needed ☐ Partial Scholarship needed

Please check only if needed:

☐ Payment Plan Needed

## INTERVIEW

Candidates will be asked to participate in a group interview with the Executive Committee following receipt of applications as part of the enrollment process.

## PHOTO RELEASE

If accepted into the program, I give permission for my photo to be used on the Eau Claire Area Chamber of Commerce website and in Leadership Eau Claire™ marketing materials. ☐ You may use my photo ☐ Don't use my photo

## COMMITMENT

Leadership Eau Claire™ consists of a **required** two-day overnight retreat, seven monthly sessions from September through April and a closing retreat in May. In addition, each class member is expected to participate in a group project under the auspices of the Chamber of Commerce and will be asked to report on all findings at the closing retreat.

The Leadership Eau Claire™ Executive Committee reserves the right to dismiss any participant from the program whom has missed two or more sessions. Attendance will be taken at each session. Please consider availability if you should be selected to participate in this year's class. If you are accepted and later find that you are unable to participate, please notify the Chamber immediately. The Executive Committee will choose an alternate.

"I understand the purpose of Leadership Eau Claire™ and, if selected, will devote the time to actively participate and complete the program."

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

## EMPLOYER COMMENT (If Applicable)

"This applicant has my full support, including the time required to actively participate in the program."

\_\_\_\_\_  
Employer Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

## REFUNDS

Because funds are utilized immediately, **no refunds** will be made after July 15, 2019.

## DEADLINE -- JUNE 3, 2019

Applications must be received at the Eau Claire Area Chamber of Commerce, 101 N. Farwell St, Suite 101, Eau Claire, WI 54703, **by June 3, 2019.**

## 2019-2020 PROGRAM SCHEDULE

TBD	Alumni Luncheon (optional)	January 16, 2020	Human Services & Volunteerism Day
August 28-29, 2019	Opening Retreat	February 13, 2020	Education Day
September 26, 2019	Agriculture & Environment Day	March 19, 2020	Health & Quality of Life Day
October 24, 2019	Government & Law Day	April 16, 2020	Business & Industry Day
November 14, 2019	Arts & Tourism Day	May 7, 2020	Weather Contingency Day
December 12, 2019	Media & Culture Day	May 28, 2020	Closing Retreat