

# LEADERSHIP WAXAHACHIE

## CONFIDENTIAL APPLICATION 2008

<b>APPLICANT CHECKLIST</b> <input type="checkbox"/> Completed Application with appropriate signatures(4 pages only) <input type="checkbox"/> 3 Reference Forms	<b>OFFICE CHECKLIST</b> <input type="checkbox"/> Completed Application with appropriate signatures <input type="checkbox"/> 3 Reference Forms
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### INSTRUCTIONS:

The following are imperative for an application's acceptance:

- Application should be neatly typed. Computer generated applications must use the same format. If you'd like an application via e-mail, please send this request to [neal.white@waxahachiedailylight.com](mailto:neal.white@waxahachiedailylight.com). **Do not use additional pages or attach resumes or other documents.**
- We will be holding one informational session. While attendance is completely optional, it will help you gain a better understanding of the selection process and give you suggestions for filling out your leadership application.
- Completed application with appropriate signatures, reference forms, are **due no later than 5:00 p.m., Thursday, May 29, 2008**. No applications will be accepted after this deadline.

### GENERAL INFORMATION:

<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs.	Last Name:	First Name:	Middle Initial:	First & Last Name for Nametag:
<input type="checkbox"/> Ms. <input type="checkbox"/> ___				
Home Address:				Length of Residence in Ellis County area:
City:	State:	Zip:	Home Phone:	
E-mail:	Office Phone:		Office Fax:	
Date of Birth:	<input type="checkbox"/> Male <input type="checkbox"/> Female	Person with Disability: <input type="checkbox"/> Yes <input type="checkbox"/> No	Cell phone:	
Ethnic Background:	<input type="checkbox"/> African American <input type="checkbox"/> American Indian <input type="checkbox"/> Anglo <input type="checkbox"/> Asian American <input type="checkbox"/> Hispanic American <input type="checkbox"/> Other (please specify):			
Previous Applicant? <input type="checkbox"/> No <input type="checkbox"/> Yes, when?		Preferred Mailing Address: <input type="checkbox"/> Business <input type="checkbox"/> Home		

### EMPLOYMENT:

Present Employer:	Waxahachie Chamber Member: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Title or Responsibility:	Length of Time with Employer:		
Business Address:	City:	State:	Zip:
Number of Employees: <input type="checkbox"/> More than 250 employees <input type="checkbox"/> 50 – 250 employees <input type="checkbox"/> Less than 50 employees			

### Type of Business:

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Accounting                 | <input type="checkbox"/> Engineering                      | <input type="checkbox"/> Real Estate/Development  |
| <input type="checkbox"/> Advertising/Marketing/PR   | <input type="checkbox"/> Foundations<br>Private/Community | <input type="checkbox"/> Retail                   |
| <input type="checkbox"/> Architecture               | <input type="checkbox"/> Government                       | <input type="checkbox"/> Religion                 |
| <input type="checkbox"/> Arts/Entertainment/Media   | <input type="checkbox"/> Healthcare                       | <input type="checkbox"/> Technology               |
| <input type="checkbox"/> Banking/Financial Services | <input type="checkbox"/> Law: Practice                    | <input type="checkbox"/> Transportation           |
| <input type="checkbox"/> Communication              | <input type="checkbox"/> Manufacturing                    | <input type="checkbox"/> Utilities                |
| <input type="checkbox"/> Community Volunteer        | <input type="checkbox"/> Non Profit                       | <input type="checkbox"/> Other: (please specify): |
| <input type="checkbox"/> Construction               | <input type="checkbox"/> Oil & Gas                        |   |
| <input type="checkbox"/> Consultant                 |   |   |
| <input type="checkbox"/> Distribution/Logistics     |   |   |
| <input type="checkbox"/> Education                  |   |   |

**EDUCATIONAL BACKGROUND:**

School/University:	City, State:	Dates (from-to):	Degree:	Major:

**PROFESSIONAL & OCCUPATIONAL ACTIVITIES:**

1. Organization: Responsibility:	Dates of Participation:	Position:
2. Organization: Responsibility:	Dates of Participation:	Position:

**VOLUNTARY COMMUNITY ACTIVITIES:**

List the key non-professional activities (charity, religious, school involvement, task forces or commissions) in which you have been an active participant in Waxahachie or other cities in which you have lived.

1. Organization: Responsibility:	Dates of Participation:	Position:
2. Organization: Responsibility:	Dates of Participation:	Position:
3. Organization: Responsibility:	Dates of Participation:	Position:
4. Organization: Responsibility:	Dates of Participation:	Position:
5. Organization: Responsibility:	Dates of Participation:	Position:
6. Organization: Responsibility:	Dates of Participation:	Position:

In an average month, approximately how many hours are spent on voluntary community activities? \_\_\_\_\_ hours

**SPECIAL HONORS/AWARDS:**

**GENERAL:**

Please answer in the space provided limiting each response to 100 words or less. **No attachments please.** Additional pages will not be given to the Selection Committee.

I. What do you consider to be your most significant professional or community contribution? Briefly explain why you consider it to be significant.
II. What do you consider the most significant issue facing the Waxahachie area today? Briefly describe how you could help influence this issue in the next five years.
III. Why should you be selected for Leadership Waxahachie?
IV. What do you hope to gain from participation in Leadership Waxahachie?

Upon selection and as part of your tuition fee, the Chamber provides a Leadership Waxahachie t-shirt for the class members. Please indicate which size t-shirt you would like:  Small  Medium  Large  X-Large  XX-Large

**TUITION:**

If admitted to the class, a tuition fee of \$500 shall be paid no later than 4 p.m., Friday, August 1, 2008. Tuition is non-refundable after September 1, 2008.

Partial scholarship funds are available but are limited. Scholarships are awarded solely on the basis of documented financial need and availability of scholarship dollars. If you are requesting a scholarship, please explain the circumstances. Proof of financial need may be requested.

**Scholarship needed:**     No     Yes, amount needed:

**Reason:**

**COMMITMENT:**

The Leadership Waxahachie program requires a significant commitment of time and energy. Participation involves an overnight Orientation Retreat in September, one full-day session per month from October to June, preliminary assignments for each of the sessions, a class project and curriculum committee meetings. Applicants must be able to fulfill program attendance requirements in order to graduate.

- The date for the Orientation Retreat is to be announced. Full participation at the retreat is mandatory, no exceptions. If selected, can you commit to this date?                     Yes                     No
- Attendance at subsequent sessions that will be held one Friday of each month beginning in October and continuing through June. Dates for the sessions are listed in the application booklet. If selected, can you commit to the nine full-day sessions?     Yes                     No  
If no, please state the day(s) that would present a conflict:

Nominees for Leadership Waxahachie must have the support of their sponsoring business or organization. **The employer must sign this form to indicate their support of the nominee’s participation in the program.**

I understand the goals and commitment of the Leadership Waxahachie program and the attendance requirements. If selected, I will fulfill all obligations outlined in this application and will pay my tuition upon acceptance. I acknowledge that I have completed the foregoing application and that all the information contained herein is true and correct. I hereby give Leadership Waxahachie the right to make inquiries regarding the information provided on this application form.

Employer’s Signature:	Date:
Employer Name (please type/print):	Title:
Sponsor/Company Name:	
Applicant’s Signature:	Date:

**DELIVERY INSTRUCTIONS & DEADLINE:** Mail or deliver completed applications to:

**LEADERSHIP WAXAHACHIE**  
**Waxahachie Chamber of Commerce**  
102 YMCA Dr.  
Waxahachie, Tx 75165  
email to Waxahachiechamber.com  
Phone: 972-937-2390    E-mail: neal.white@waxahachiedailylight.com  
**Application Deadline: No later than 5:00 p.m. on Thursday, May 29, 2008**