

THE CHAMBER
LEADERSHIP FMWF

PROGRAM APPLICATION

1. PERSONAL INFORMATION

First Name: _____ Last Name: _____

Preferred First Name (if different): _____

Business/Organization Name: _____

Business/Organization Address: _____

Email Address: _____

Work Phone: _____ Cell Phone: _____

Supervisor: _____ Supervisor's Email: _____

Years with Employer: _____ Years in Fargo Moorhead West Fargo area: _____

2. DEMOGRAPHIC PROFILE

Leadership Fargo Moorhead West Fargo seeks to reflect the diversity of the community in its class. The following questions may be answered at the discretion of the applicant.

Gender: _____

Ethnic Origin:

___ African American

___ Asian American

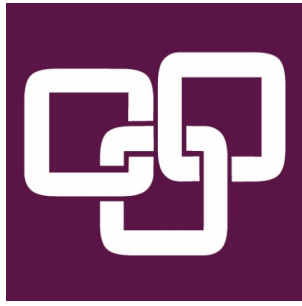
___ Caucasian

___ Hispanic

___ Native American

___ Other _____

Birthdate: ____/____/____



THE CHAMBER
LEADERSHIP FMWF

3. CURRENT EMPLOYMENT

Position/Title: _____

Job responsibilities:

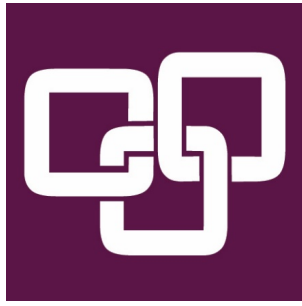
What do you consider your greatest career achievement to date?

4. PREVIOUS EMPLOYMENT

If applicable, list previous positions held in the last 6 years:

5. EDUCATIONAL BACKGROUND

Include institutions, field(s) of study and degrees awarded. Also include any relevant professional accreditations, certifications, training programs, etc.



THE CHAMBER
LEADERSHIP FMWF

6. EXPERIENCES

A. Please list in order of personal importance the major civic, business and professional activities in which you have participated during the past several years. For each activity, indicate the extent of your involvement, accomplishments, offices held, awards received and/or special recognitions. Experiences need not be limited to those in the Fargo Moorhead West Fargo area. If you have not been involved in such activities, please explain why.

B. Please explain why you ranked your organizations and activities in this order.

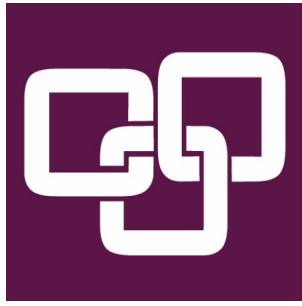
C. Have you participated in a similar leadership program here or in another community? ____Yes ____No

If yes, when/where? _____

7. REFLECTION ESSAYS

Please answer the following questions. Total length per essay should be 250 words or less.

A. How did you hear about this program and why are you interested in participating?



THE CHAMBER
LEADERSHIP FMWF

B. What do you hope to gain from your participation in this program? What do you feel you would contribute to the program?

C. A key component of the Leadership Fargo Moorhead West Fargo Program are group projects dedicated to addressing needs or issues in our community. What is a need or issue you would like to address through this project?

8. LETTERS OF RECOMMENDATION

Two letters of recommendation are required with your application. One letter is to come from your supervisor. (Or if you are self-employed, someone in the community.) The other letter should come from a colleague or service organization in which you are involved. The letter should explain how your background and experience would contribute to the leadership class and why you should be considered for the 2018-19 Leadership Fargo Moorhead West Fargo program.

9. INTERVIEWS

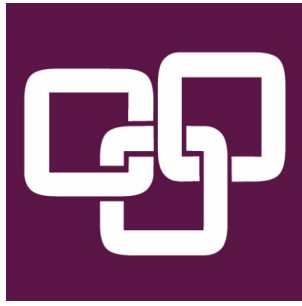
Brief, 30-minute interviews will take place June 4 to June 8 from 8:30 a.m. to 4:30 p.m. Please rank in order which days and times will work best with your schedule.

1st preference _____ 2nd preference _____ 3rd preference _____

10. TUITION ASSISTANCE (OPTIONAL)

To assist qualified individuals who may not otherwise be able to participate, financial assistance is available. Please indicate your request for financial assistance, if necessary.

_____ Partial Scholarship _____ Extended Payment Plan



THE CHAMBER
LEADERSHIP FMWF

APPLICATION CHECKLIST

Completed application MUST include:

- ___ Leadership Fargo Moorhead West Fargo program application.
- ___ Letter of recommendation from employer. If self-employed, letter of recommendation from local colleague or community leader.
- ___ Letter of recommendation from colleague or service organization in which you have been involved.
- ___ Applicant and Employer Agreement.

Applications will not be considered until ALL materials are submitted.

Applications must be received by Thursday, May 17, 2018 at 4 p.m.

Questions regarding this application may be directed to:

Alyssa Ralston
Professional Development Coordinator
The Chamber
218.359.0529
aralston@fmwfchamber.com

MAIL

The Chamber
Attn: Alyssa Ralston
202 First Avenue North
Moorhead, MN 56560

EMAIL

aralston@fmwfchamber.com