

# LeadershipPike

A program of the Pike County Chamber of Commerce, Inc.

The Leadership Pike County program was established to bring together individuals, who represent the diversity of the population of Pike County, Alabama and who share concerns for improving the quality of life in Pike County and who have manifested a willingness and ability to assume leadership responsibilities in addressing these concerns.

## **CRITERIA**

Leadership Pike County is an issues and skills-oriented leadership development program designed to inform, motivate, and increase the awareness of selected participants through interaction with community decision-makers. All class positions are open each year, and application does not guarantee selection. Class size is up to 14 participants per year, with members selected based on the following criteria:

- high standards of personal integrity
- record of achievement in community activities or a desire to increase community involvement
- the ability to set and attain goals, as demonstrated by significant career, personal or community achievement
- the commitment of necessary time and effort to complete the program
- representation from a cross-section of the population

## **COMMITMENT**

To graduate from Leadership Pike County, participants are expected to make a commitment to the program and to attend all sessions which includes a one day retreat, and to complete a requirement of ten (10) individual hours of volunteer work through the Pike County Chamber of Commerce, Inc. Class days are normally the third Wednesday of each month and run from 8:00 a.m. – 5:00 p.m., unless noted.

## **TUITION (Due upon acceptance into the class)**

If accepted into the program, you or your employer/sponsor will be responsible for your tuition, which will be due prior to the opening retreat. Tuition is \$375 and will cover all program costs, including food and transportation. Tuition is nonrefundable, in the event that you fail to complete the program due to non-attendance or other reasons. In addition, unless you are self-employed, your employer must agree and approve your participation recognizing that it will require time away from your position at work, as well as a much smaller commitment of time once you graduate if selected for the Alumni Board.

Thank you for your interest in the Leadership Pike County program. We look forward to receiving your application. **Applications are due by noon on July 23, 2021.** If you have further questions, please feel free to call our office at 566-2294 or email us at [info@pikecoc.com](mailto:info@pikecoc.com).

FOR OFFICE USE ONLY		
DATE RECEIVED: _____	LM CLASS: _____	YEAR: _____

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## 2021-2022 APPLICATION

### Chamber Sponsor Information

Any Pike County Chamber of Commerce, Inc. member of good standing having an interest in the objectives of Leadership Pike County is eligible to nominate one prospective applicant for participation in the Leadership Pike County program.

Member Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Number: \_\_\_\_\_

Address: \_\_\_\_\_

Sponsor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Applicant Information

#### Personal

Name: \_\_\_\_\_

First

Middle

Last

Preferred Name: \_\_\_\_\_ Years in Pike County: \_\_\_\_\_

Preferred Address: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

#### Employment

Company Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Business Email: \_\_\_\_\_

Length of Employment: \_\_\_\_\_ Present Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

List previous professional employment (reverse chronological order). Include military duty.

Employer	Title/Responsibility	Year
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Education**

High School: \_\_\_\_\_ City: \_\_\_\_\_ Degree/Year: \_\_\_\_\_

College: \_\_\_\_\_ City: \_\_\_\_\_ Degree/Year: \_\_\_\_\_

\_\_\_\_\_ City: \_\_\_\_\_ Degree/Year: \_\_\_\_\_

Other: \_\_\_\_\_ City: \_\_\_\_\_ Degree/Year: \_\_\_\_\_

Are you a graduate of another leadership program?  Yes  No

If yes, which one and when? \_\_\_\_\_

**Community Involvement**

**Please answer in the space provided. No attachments, please.**

List in order of importance to you, significant community, civic, political, governmental, religious, social, or other areas of involvement in which you have participated in the last five years.

Organization	Positions Held/Honors Received	Dates & Location
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

How much time monthly do you commit to volunteer service? List Organizations.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What is your most significant volunteer service accomplishment?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What is one area that you can significantly contribute to the improvement of Pike County?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



General Information

Why do you want to be a member of this Leadership Pike Class and what specific skills/knowledge do you hope to gain from Leadership Pike?

Four horizontal lines for writing the answer to the question above.

List three professional references:

Table with 4 columns: Name, Position, Organization, Telephone Number. Three rows of blank lines for input.

Is there anything else you would like to discuss about yourself or your experiences that would aid in this selection process?

Two horizontal lines for writing the answer to the question above.

Employer Endorsement

As the employer of the applicant, I understand and agree that my employee, if selected, will be required to attend the entire Leadership Day mini retreat and each of the nine full-day sessions during the months of September through June, and ten (10) hours of individual volunteer hours, barring an unforeseen emergency. I further understand that if an unavoidable emergency situation should arise, my employee, if selected, is permitted to miss only two of the nine class days and still graduate with the class. I further understand that, if accepted into the program, either the applicant or the applicant’s employer/sponsor will be responsible for the tuition, which will be due prior to the opening retreat, and have made arrangements for such payment, if selected. Tuition is \$375 and will cover all program costs, including food, bus transportation and staff time. Tuition is nonrefundable, in whole or in part, in the event that the applicant, if selected, fails to complete the program due to non-attendance or other reasons.

Employer: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Number: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

Employer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Check Here if Self-Sponsoring without an Employer’s Endorsement



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## Program Commitment

I understand and agree that I will attend the entire Leadership Day mini retreat and each of the nine full-day sessions during the months of September through June, barring an unforeseen emergency. I understand that if an *unavoidable emergency situation* should arise, I am permitted to miss only **two** of the nine class days and still graduate with my class. In the case of an emergency, I will notify the coordinator and the class president as soon as possible. I understand that any days I am absent from the class my employer will be notified of my absence. **I will fully commit to the class and will be on time as well as stay all day for the class.**

I further agree to participate in all class assignments to the best of my ability and to abide by all rules of the program, including turning off technological devices such as cellphones during classes. I understand that time will be allotted for me to check my messages during breaks and lunch, and I pledge to adhere to these important guidelines. I understand that each class has a specific dress code and will follow the dress code for each class as listed in the materials given at orientation.

I will to the best of my ability participate in completing ten (10) hours of individual volunteering. I understand that this is a requirement of completing the class and must be completed within the specified timeline.

I understand that failure to abide may result in my removal from the program.

Upon successful completion of the class year, I understand that I may be chosen by the Leadership Pike Alumni Board to serve on the committee.

Applicant Signature \_\_\_\_\_ Date: \_\_\_\_\_

Applicant Name: \_\_\_\_\_ Contact Number: \_\_\_\_\_

Email: \_\_\_\_\_