

Leadership
KINGSPORT™

APPLICATION

Contact Information

Name _____

Age _____ Sex _____ Years lived in Kingsport Area _____

Home Address _____

_____ Home Phone _____
City State Zip

Work Phone _____ Cell Phone _____

E-Mail Address _____

Spouse's Name _____ Age(s) of children _____

Employment Information

Employer _____

Address _____

_____ City State Zip

Position _____ Years with Employer _____

Immediate Supervisor _____ Phone _____

What are the Primary Elements of your Job _____

Has your employer (or some other organization agreed to pay your tuition?

_____ No _____ Yes Organization or Employer

Mail any correspondence to: _____ Home address _____ Work address

List up to five community, civic, professional, business, religious, social, athletic and/or other organizations in which you are an active volunteer and describe briefly your involvement.

1. _____

2. _____

3. _____

4. _____

5. _____

List up to five leadership positions you have held and briefly describe your role/responsibility/experience.

1. _____

2. _____

3. _____

4. _____

5. _____

How do you see yourself being involved in the community in the future?

What do you believe are the three most important issues facing the Kingsport area?

Choose one of the issues identified in the previous question and elaborate on your reasons for selecting it and addressing it.

SIGNATURE _____ **DATE** _____

On behalf of Leadership Kingsport and the Kingsport Chamber of Commerce, thank you for demonstrating interest in the Leadership Kingsport program by completing this application. Since we have a large number of applications for a limited number of positions, we may not be able to place you in this year's class. If you are not selected for this year's class, may we consider your application active for the next class? _____ YES _____ NO

PLEASE RETURN TO:

Leadership Kingsport, c/o Vanessa Bennett
Kingsport Chamber of Commerce
400 Clinchfield Street, Suite 100
Kingsport, TN 37660
Phone (423) 392-8813
Fax: (423) 392-8834
vbennett@kingsportchamber.org



Leadership Kingsport Participant Agreement

I understand that the purpose of Leadership Kingsport is to develop individuals who are able and motivated to assume community leadership positions. In order for the program to be effective and achieve its purpose, attendance at all sessions for the entire day by all participants is necessary. I understand the necessity of requiring attendance and will, **if selected** for this year's class, agree to the following commitments (please initial all items to which you agree):

_____ I will attend the overnight retreat in September. If, for any reason, I am not able to attend the entire retreat, I understand that I will be removed from this year's class and may be given the option of attending next year.

_____ I understand that I am expected to attend all program sessions and that 100% attendance or makeup requirement is necessary to graduate. The program days are generally scheduled the second Thursday of each month from October through May, from 8:00 a.m. to 5:00 p.m.

_____ I understand that any half-day or more missed will require make-up work in order to fulfill the attendance requirement and graduate and subsequent misses will be discussed.

_____ I understand that there is a community impact project that will require some meetings beyond the monthly program sessions and I agree to participate in it.

_____ I have discussed these requirements with my employer and have his//her complete support.

_____ My tuition of \$1,000 will be paid. Limited scholarships are available.

Please print name of person or company to be billed.

Participant Signature

Date _____

Supervisor Signature

Date _____