## Leadership Sun Prairie

2019-2020 Application

Personal Information	Job Information
Name:	Employer:
Home Address:	Present Job Title:
City/Zip: Home Phone:	Start Date of Employment with Present Employer:
Business Address:	Present Job Responsibilities:
City/Zip:	
Business Phone: Business Fax:	
Email: (for correspondence)	
Would you prefer that Leadership Sun Prairie correspondence be sent to your home or business address:	
Home: Business:	
Please Answer the Following Ques  1. Number of years primary residence/work in Sun Prairie?	
2. List any past and present civic/community organizations with which you were	e or are active(include years).
3. List any past and present professional/business organizations with which you	were or are active (include years).
4. For any of the organizations mentioned in questions 2 or 3, what do you const	ider to be your greatest accomplishment in the group. Why?
5. Name someone (past or present) whom you consider to be a great leader, exmost.	plain what characteristics about this person you admire

5.	In your opinion, what is Sun Prairie's most pressing challenge?
7.	What do you feel is the community's greatest strength?
3.	Why are you applying for Leadership Sun Prairie? Or, What do you expect to gain by participation in Leadership Sun Prairie?
€.	Two \$100 scholarships are available for candidates who might otherwise be unable to participate in the Leadership program.  Based on financial need, are you interested in a \$100 scholarship? If yes, the Chamber of Commerce will contact you for more financial information to support that request.
	Yes: No:
	Leadership Sun Prairie 2019-2020
	Commitments
	MPLOYER COMMITMENT: (Disregard if owner, self-employed, or unemployed)  The applicant has our full support to participate in Leadership Sun Prairie 2019-2020. We will make all necessary arrangements to commodate the applicant's work schedule. I understand that the cost of the program is \$275.00.
Na	me: Title:
Fii	rm/Organization:
Się	gnature: Date:
эу	PPLICANT COMMITMENT:  I will clear my calendar to participate in the 2019-2020 Leadership Sun Prairie program. I have my employer's support as indicated the signature above. Even though emergencies do arise, I understand that persons missing a significant portion of two sessions may be smissed from the program and will not be entitled to a refund. I understand that the cost of the program is \$275.00.
Sig	gnature: Date:

## Please Return Completed Application Form With Signed Commitment by May 31, 2019 to:

Sun Prairie Chamber of Commerce 109 E. Main St. Sun Prairie, WI 53590

Fax: 837-8765

(If you have any questions regarding this application, please feel free to call the chamber office at: 837-4547)

Due to logistics, the number of participants in the program is limited to 14.