



The selection committee will choose participants based on their responses to the following questions. Please answer as completely as possible on a separate printed page. Attach answers to your completed application form and submit two copies of all application materials.

1. Enclose a resume. Include degrees awarded, fields of study, professional institutes, training programs, etc. List professional affiliations, community, religious, athletic and social organizations with which you have been or are currently involved.
2. Describe a professional or community leadership challenge you have undertaken.
3. What would you contribute to the Albert Lea Community Leadership class?
4. In what ways do you think Albert Lea Community Leadership can help you develop your leadership potential? What do you expect of the program? (Please submit approximately half a printed page.)
5. Identify and discuss an issue that you feel is critical to the Albert Lea area. (Please submit approximately half a printed page.)
6. Are you willing to commit ten full days to attend Albert Lea Community Leadership?

SEND TO: Albert Lea Community Leadership, C/O Chamber of Commerce, 132 N. Broadway Ave., Albert Lea, MN 56007

Who will be paying your tuition? Me My employer A sponsoring organization

Full Name: _____

Company: _____ Title: _____

Address: _____

City: _____ State: _____ Zip: _____

Work Phone: _____ Cell Phone: _____

Email: _____

Home Address: _____

City: _____ State: _____ Zip: _____

References: List your immediate supervisor and at least one other person who may be contacted by the selection committee.

Name: _____ **Company:** _____

Title: _____ **Phone:** _____

Name: _____ **Company:** _____

Title: _____ **Phone:** _____

Signature of Applicant Date

Signature & Title of Applicant's Sponsor (if appropriate) Date