



November 12, 2019

Dear Chamber Friend,

I encourage you or someone from your organization to apply for this highly successful program. The Hibbing Area Chamber of Commerce is currently taking applications for the **2020 Leadership Program**.

**Three Things You Need to Know:**

- **This value added program** will offer participants an opportunity to grow personally, professionally, and as a community member. Trainers are of the highest caliber. Past participants have rated the program highly and have retained a strong relationship with our leadership networks. The cost of the program is a fraction of what it would be if purchased through most business training organizations.
- **We are strict about attendance.** Participants are expected to attend all sessions in their entirety. Employers sponsoring an employee are required to sign off on their application. We urge employers to help participants achieve 100% attendance goals. We keep an attendance log for CEUs and we make that information available to employers. Please call if you have questions regarding this expectation.
- **Enrollment is limited to 36 participants.** The **application** deadline is **Wednesday, December 11, 2019**. However, the sooner you get the application in the more likely you are to get in the class. We have been full with a waiting list in the past. The **payment** deadline is **Friday, December 27, 2019**. Please call if you will have trouble meeting the deadlines.

If you have any questions, please call me at 218.262.3895 or program chairs: Brad Castagneri at 218.966.4719 or Megan Menara at 218.969.5503. If you are not able to participate this year, perhaps someone else in your organization would be interested, or you may be interested in sponsoring an applicant from a community organization.

We look forward to hearing from you.

Most Sincerely,

Vicki Hagberg, President  
[v.hagberg@hibbing.org](mailto:v.hagberg@hibbing.org)





## 2020 LEADERSHIP APPLICATION

Thank you for your interest in the 2020 Hibbing Area Chamber of Commerce Leadership Program. Applications must be legible and should be returned to the Chamber Office by Wednesday, December 11, 2019. Our contact information is: [hibbcocf@hibbing.org](mailto:hibbcocf@hibbing.org), PO Box 727; Hibbing, MN 55746, 218-262-3895.

Preference will be given to applications received by the deadline.

APPLICANT NAME: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_  
City State ZIP

EMPLOYER NAME: \_\_\_\_\_

EMPLOYER ADDRESS: \_\_\_\_\_  
City State ZIP

POSITION / TITLE: \_\_\_\_\_

TELEPHONE NUMBERS: WORK: \_\_\_\_\_ HOME: \_\_\_\_\_

FAX: \_\_\_\_\_ CELL: \_\_\_\_\_

EMAIL \_\_\_\_\_

*\* Our main communication for this program is through email. Please provide the email that you would like to be used for communication from the Chamber and your team.*

How did you hear about this program? \_\_\_\_\_EMAIL, \_\_\_\_\_WORD OF MOUTH, \_\_\_\_\_MAILING/LETTER, \_\_\_\_\_SOCIAL MEDIA, \_\_\_\_\_WEBSITE, \_\_\_\_\_OTHER

I would like to participate in the Leadership Class 2020 because:

My involvement with a community or nonprofit organization(s) is / has been:

My hopes for the future of the Iron Range and my role in it are: (dream a little)

Please state your desires and goals for your own personal and professional growth:

**Class and group participation is vital to the success of your leadership program experience. Therefore, it is expected that you will attend 100% of the sessions and fully participate in all aspects of your team project.**

**The Chamber occasionally makes exceptions in the case of personal emergencies or illness, but you must notify the Chamber in advance of the absence.**

I understand if I am accepted into the 2020 Leadership Program, I or my employer must pay a \$400.00 tuition fee, (or \$475.00 if not a Hibbing Area Chamber member). No portion of tuition is refundable. Payment is due Friday, December 27, 2019. Materials, meals, and snacks are provided for every session and is included in the cost. **If you have any medical considerations you'd like us to know or dietary restrictions, please contact us.**

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

**IMPORTANT**

*~ only if applicable ~*

My (employer) signature indicates I approve the participation of \_\_\_\_\_  
(participant name)

in the 2020 Hibbing Area Chamber of Commerce Leadership Program. I have reviewed the course schedule and agree the employee must attend 100% of all program sessions. (We keep an attendance log for CEUs and make that information available to employers.)

EMPLOYER NAME (please print): \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_