

LEADERSHIP GASTON APPLICATION

Choose session: Spring 2023	Fall 2023	
PERSONAL INFORMATION		
Full Name:		
Email Address:	Cell Phone:	
Employer (Company Name):		
Start date of current employm	nent:Job Ti	tle:
COMMUNITY INVOLVEMENT		
List up to three community, ci which you are or have been a r	ivic, professional, business, soc member:	ial or other organizations in
Organization	Purpose of your role	Dates of affiliation
1.		
2.		
3.		
PERSONAL STATEMENT		
What do you feel are the great County?	est challenges and/or opportu	nities ahead for Gaston

TUITION INFORMATION

Note: Application must be filled out completely and delivered to the Gaston Business Association with a deposit of \$200. The selection process will be completed on a rolling basis, and you will be notified and billed at that time for the remaining \$375 fee for GBA members, if accepted into the Leadership Gaston program. Fee covers all expenses.

SCHOLARSHIP INFORMATION

Leadership Gaston offers A \$150 scholarship and will be awarded based on need. Applications for scholarship assistance are confidential and considered separately so will not affect class selection. Scholarship assistance applies to GBA members only.

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If you would like to apply for the scholarship, please briefly explain why you need assistance on a separate document.

MY PERSONAL COMMITMENT TO LEADERSHIP GASTON

- I agree to participate in all activities planned for this program and do understand the following expectations of each class participant:
- Each participant is required to attend 7 all-day sessions.
- Each participant is expected to complete certain required "out of class" assignments. (e.g. police ride along, city council meeting and/or volunteer work at a community event.)
- I also am aware that my employer will be kept informed of my participation in Leadership Gaston.

Signature of Applicant	Date
Approval:	
Signature of Supervisor	Date_

Please complete, scan, and send to steve@gastonbusiness.com