



**2006-07 Application  
Due by June 9, 2006**

*DIRECTIONS: All applications must be typed and are subject to verification. The completed application cannot be longer than the original two pages. Do not attach resume. Be sure to answer all questions. Applications will be disqualified if above directions are not followed.*

**General Information**

Name: \_\_\_\_\_ Preferred Name: \_\_\_\_\_  
Employer: \_\_\_\_\_ Title: \_\_\_\_\_  
Preferred Mailing Address: \_\_\_\_\_  
Daytime Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_  
Email: \_\_\_\_\_ Fax: \_\_\_\_\_  
The responsibilities of my position include: \_\_\_\_\_

Prior employment (indicate dates): \_\_\_\_\_

Participants may not miss more than 14 hours in order to graduate, and attendance at the out-of-town retreat (scheduled for September 14-15, 2006) is mandatory. In addition, participants will be required to take part in enrichment activities and a class project. Please indicate your acceptance of this commitment below.

Applicants will be evaluated and then a select group will be chosen for interviews and considered for admission.

You and your employer's signatures below indicate that you both understand the following: (1) you (the applicant) can make the attendance commitment and have the support of your employer and (2) all applicants cannot be chosen to participate.

Please indicate you and your employer's understanding of the attendance policy and selection process listed above by signing below (both MUST sign).

_____	_____
Date	Applicant's Signature
_____	_____
Date	Employer's Signature
	Telephone #

\* Only 2 participants per chamber membership if they are accepted into the class.

**Education**

High School: \_\_\_\_\_ Location: \_\_\_\_\_ Diploma/Year: \_\_\_\_\_

College: \_\_\_\_\_ Location: \_\_\_\_\_ Diploma/Year: \_\_\_\_\_

Post Graduate Work: \_\_\_\_\_ Location: \_\_\_\_\_ Diploma/Year: \_\_\_\_\_

Educational accomplishments, honors or recognition:

I wish to participate in Leadership Columbia because:

I believe I will make the following contributions to the greater Columbia area over the next five years:

Three priorities that I would like to see addressed by the leaders in the greater Columbia area are:

- 1)
- 2)
- 3)

## Community Involvement

Community activities in which I have participated include: **(List activities in order of importance. Do not abbreviate. Community activities are an important part of the interview process.)**

Organization: \_\_\_\_\_ City: \_\_\_\_\_ Year: \_\_\_\_\_

**\*\*Activity/Role:**

Organization: \_\_\_\_\_ City: \_\_\_\_\_ Year: \_\_\_\_\_

**\*\*Activity/Role:**

Organization: \_\_\_\_\_ City: \_\_\_\_\_ Year: \_\_\_\_\_

**\*\*Activity/Role:**

**\*\*Please note if you were a committee chair.**

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Which community activities are required by your employment? Explain if applicable:

What of importance do you feel you have accomplished in the Community Activities section?

Describe your involvement in Greater Columbia Chamber of Commerce Events:

Additional information that I would like the selection committee to have in considering this application:

How did you find out about Leadership Columbia?

Tuition in the Leadership Columbia program is **\$1375 for Chamber members and \$1750 for non-Chamber members. Full payment or arrangements for payments must be made by September 1.** Partial scholarship funds are available, based on need, and will be considered only after candidate selection is made.

Please designate % of tuition to be paid: by employer \_\_\_\_\_% by participant \_\_\_\_\_%

? I would like to apply for a scholarship. Please note that, if you do not check the box, you will NOT be considered for a scholarship. (A statement indicating financial need must also accompany application.)

**Return by June 9 to  
Leadership Columbia, PO Box 1360, Columbia, South Carolina 29202  
(803) 733-1123 FAX (803) 733-1149 EMAIL [egranger@columbiachamber.com](mailto:egranger@columbiachamber.com)**

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