

2024 Application

DEADLINE: October 31, 2023

PARTICIPANT TYPE Employer Sponsored Individual

Full Name	Email the following to tracy@shreveportchamber.org					
Preferred Name for						
Date of Birth	□ Completed Application□ Applicant Headshot, jpg high					
Complete Home A						
				resolution format preferred		
		☐ Current Resume☐ (2) Letters of Recommendation				
Personal Faceboo	Questions, call 318.677.2547					
How long have yo						
If Applicable:	0					
Spouse's Name &	Organization					
	•					
Do you nave any t	ood allergies or diet rest	rictions?				
EMPLOYMENT SE	CTION					
Organization						
Address						
Office Phone		E-mail				
HIGHER EDUCATI	ON (begin with highest level	completed) Univ	versity, Years Attended, De	egree (include major/minor)		
professional, relig Indicate major rol		tivities with which	portance to you: any civic n you are currently or have Organization			
Position/Assignment Responsibilities			Responsibilities			
·			·			
	ERESTS (please select all th					
Arts/Culture	Economy/Business	Education	Energy/Water	Environment/Climate Change		
Government Social Services	Healthcare Transportation	Housing Workforce Dev	International Affairs	Land Use Other		
Social Sci Vices	Talisportation	WORKOTCE DEV	Copilicit	Juliu		
RECOGNITIONS (A	lease list two in order of imp	oortance to you) A	ward/Honor, date receive	ed		
			· 			

PLEASE ANSWER THE FOLLOWING QUESTIONS IN THREE TO FOUR SENTENCES Describe how you demonstrated leadership in one of your Civic/Community Activities? What do you consider your greatest career achievement to date? What do you consider your most important contribution to the community? In your opinion, what are the most pressing problems facing the Shreveport/Bossier area today? What would you propose in order to address one of these problems? How did you become aware of the Greater Shreveport Leadership Program? How do you hope to benefit from being a participant? What will you contribute to the Program as one of its participants?

GENDER	Female	Male					
ETHNICITY	•	American In	•	Asian American His U.S. Citizen? (please circle one	•		
MARITAL ST	ATUS Sing	gle Married	l Divorced/Wid	owed			
RECOMMEN Name			Organ	nization			
	ameOrganizationositionPhone						
PLEASE NOT	E THE FOLLOWI	ING:					
full participe with an orien ceremony. F the Legislatu Project (add	ation of each ind ntation reception articipants meet re in Baton Rou	lividual is essenti and mandatory once each mon Ige. Participants mitments will be	ial. The Greater Shre two-day Opening th for (7) one-day s are also required required in order	Shreveport Leadership Program of Retreat and ends in Novem sessions, along with a mand to work with their class on to fulfill the Community St	commences in February aber with a graduation atory, two-day visit to a Community Service		
the attendar than two of	nce at the openin the remaining ses	ng retreat as well ssions for whatev	l as the Baton Roug er reason, you will b	ommitment that will be required te session are mandatory and the automatically dropped from the comments of the comments of	d that if you miss more m the program with no		
\$1,700 for I	member organizat	tions and \$2,200		d/or your employer will be in \$50 application fee will also ary 2, 2024.	-		
	elow, you indicate eport Leadership	=	_	adhere to the required financ	ial commitment for the		
•	employer be resp	•		Yes	No		
Do you n		ered for scholars	on? hip for the program	Yes Yes	No No		
If sponsored,	both signatures a	re required. If yoເ	ı alone, are responsik	ole for your tuition, only you ar	re required to sign.		
	•	•	•	ill be paid by February 2nd, 20 Peport Chamber of Commerce.			
Applicant's	Signature:			Date:			
Employer's	Name (please ty	pe/print):		Employer's Title:			
Sponsor/Co	ompany Name:						

DEMOGRAPHICS For statistical purposes only; has no bearing on candidacy for admission

Date:

Sponsor/Employer's Signature:

EMPLOYER CONSENT

Participants of the Greater Shreveport Leadership Program must have the support of their employer. **The employer must sign this form to indicate their support.**

This application has the approval of this organization and the applicant has our full support, which includes the time necessary to fulfill the program requirements and the financial commitment listed above.

Employer's Name (please type/print):	Employer's Title:
Sponsor/Company Name:	
Sponsor/Employer's Signature:	Date:
APPLICANT ACKNOWLEDGMENT OF COMMITMENTS	
Please read the following, initialing to signify understanding and com	pliance, and sign below.
Full participation at the two-day Opening Retreat is mandatory, no ex	xceptions. Retreat Date: February 06-07, 2024
Full participation at the one-day, Legislative session is mandatory, n	o exceptions. Date: May 7, 2024
Class members must participate in all of the scheduled Sessions held miss more than two sessions.	l from March to October. No class member may
Class members must be involved and engaged with their selected time commitments will be required in order to fulfill the Community Service project developed by the team.	•
Tuition/Sponsorship is non-refundable and non-transferable and musigned parties above, are responsible for payment to the Greater Shrevep	
understand the goals and commitment of the Greater Shreveport requirements. If selected, I will fulfill all obligations outlined in this aptuition upon acceptance. I acknowledge that I have completed the application is true and correct. I hereby give the Greater Shreveport Chamber regarding the information provided on this application form.	oplication and will see to payment of my cation and that all the information contained
Applicant's Signature:	Date:
Participants DL#: State Issued:	