

# APPLICATION FORM



The mission of Leadership Ohio is to identify, educate, communicate, inspire and engage Ohio's current and emerging leaders for the well being of the people of Ohio.



# APPLICATION FORM

Leadership Ohio  
14662 State Route 58  
Oberlin, OH 44074  
Tel: 440-821-0530  
[www.LeadershipOhio.org](http://www.LeadershipOhio.org)

## SUBMISSION DEADLINE:

Must be postmarked on or before March 18, 2010  
Application can be submitted now for 2010

## INSTRUCTIONS:

- Please **type or print** your information.
- Applications must be signed by both applicant and employer if the applicant is not the CEO
- Please submit the **original application** plus **1 copies**
- Mail completed application and application fee

## PERSONAL DATA

Nominated by	Your Name
Employer	Position/Title
( )	( )
Work Phone	Home Phone
( )	( )
Work Fax	Home Fax
Business Address	Home Address
City, State, ZIP Code	City, State ZIP Code
Email Address	<input type="checkbox"/> Home <input type="checkbox"/> Work
	Preferred Mailing Address (check one)

## EDUCATION

Name of School	Dates Attended
Degree Earned	Training Earned
Name of School	Dates Attended
Degree Earned	Training Earned

## ACTIVITY DATA

### Major Volunteer Leadership Roles

Please list, in order of importance, up to four of your most recent volunteer leadership roles.

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Organization

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Dates

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Responsibilities

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Organization

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Dates

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Responsibilities

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Organization

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Dates

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Responsibilities

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Organization

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Dates

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Responsibilities

### Leadership Attributes

What attributes do you have that make you an effective community leader/trustee?  
Give specific examples of how you have demonstrated these attributes in the space below.

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## COMMUNITY ANALYSIS

One of the goals of Leadership Ohio is to build a network of community leaders who can enhance their problem solving and leadership abilities through shared perspectives and working together.

**A. What do you believe are the three most important problems facing Ohio today?**

- 1.
- 2.
- 3.

**B. What needs to be done to address these issues?**

**C. What are three of Ohio's major assets?**

- 1.
- 2.
- 3.

**D. What can be done to further develop these assets?**

## PARTICIPATION AND COMMITMENT

- Leadership Ohio requires a serious commitment of time and energy.
- Full participation of each individual is necessary, and attendance at the **entire** program of each 2-day session is expected. (Absence of more than a total of 2 calendar days will render the candidate ineligible for graduation with his/her class. Except for opening retreat, make-ups of missed session days during the following class year are permitted in order to graduate from the program.)
- **Participation in the FULL two-day April retreat is mandatory.**
- Participants may have assignments outside class sessions.

Will you be able to fulfill this commitment?

Yes

No

Class projects may be a voluntary activity outside class time. Will you be willing to participate?

Yes

No

What do you hope to gain from the program and how do you expect to utilize your Leadership Ohio experience?

Have you previously graduated from any Leadership program? If so, list the name of program and the date graduated.

## TUITION AND COSTS

Following are the tuition and other costs to be paid by participants for the 2010 Leadership Ohio program:

- **Your personal check of \$100 as an application fee**, which represents a personal commitment to the program, is required of each applicant and must be submitted with the application. The application fee is in addition to the tuition amount. ***Applications not accompanied by check for processing fee will not be considered.***
- A \$3,100 tuition fee, which does NOT include application processing fee.
- Lodging, travel expenses to the host city for each session will be paid by participant and/or sponsoring organization.

Limited financial aid is available. To apply for financial aid, please call the Leadership Ohio office for a financial aid request form, which must be submitted with this application. Awards are based on your explanation of need, the number of requests, and the amount of funds available. You may request up to one-half the tuition amount (\$1,550); however, your request for financial aid does not guarantee you will receive aid.

### **SUBMISSION DEADLINE:**

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The first half of the tuition is due by April 30, 2010 and payment of the balance is due in full prior to May 30, 2010. ***If, after April 1, 2010, the applicant withdraws for any reason, tuition is non-refundable.***

Who will pay your tuition?

Sponsor

Self

If tuition is to be paid by someone other than the candidate, financial sponsor must complete the following:

I agree to pay \$ \_\_\_\_\_ of the Leadership Ohio tuition for the above applicant if the applicant is accepted into the program. I understand that if the applicant withdraws from the program for any reason after April 1, 2010, the tuition is non-refundable.

\_\_\_\_\_  
Financial Sponsor Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Organization

\_\_\_\_\_  
Date

## DEMOGRAPHICS

Completion of this section is optional.

- |                                 |  |   |
|---------------------------------|--|---|
| <input type="checkbox"/> Male   | <input type="checkbox"/> American Indian /Native Alaskan | <input type="checkbox"/> Asian/Pacific Islander |
| <input type="checkbox"/> Female | <input type="checkbox"/> Black (not of Hispanic origin)  | <input type="checkbox"/> Caucasian/White        |
|                                 | <input type="checkbox"/> Hispanic                        | <input type="checkbox"/> Other                  |

## REFERENCES

_____ Name	_____ Title
_____ Organization	_____ Phone
_____ Name	_____ Title
_____ Organization	_____ Phone

## MEMORANDUM OF UNDERSTANDING

- A. I understand the purpose of Leadership Ohio, and that completing this application does not ensure my acceptance into the class. If selected to participate, I will devote the time required to attend each program session and will pay my full tuition prior to May 30, 2010.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

- B. This candidate has my full support to participate in Leadership Ohio. I am aware of the time commitment involved in his/her effective participation as well as the financial obligation. (Signed by organization's Chief Executive Officer, if other than applicant)

\_\_\_\_\_  
Employer's Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Organization

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date