



# LEADERSHIP Westmoreland

## CLASS OF 2021 APPLICATION

Applications are due May 13, 2020.

Acceptance notification will occur on or before June 12, 2020.

### Participant Contact Information

Name \_\_\_\_\_ Name preferred for name tag \_\_\_\_\_  
Last First MI

Employer/Organization \_\_\_\_\_

Business Address \_\_\_\_\_  
Street # City Zip Code

Work Phone: \_\_\_\_\_ Extension \_\_\_\_\_ Fax Number \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email address \_\_\_\_\_

Home Address \_\_\_\_\_  
Street # City Zip Code

Years living or working in County:  0-11 months  1-4 yrs., 11 months  5-9 yrs., 11 months  10 yrs.+

### Education Background *(List college(s), business or trade schools or other specialized training.)*

School Name City, State Major Degree

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Employment *(Account for all periods, including military duty.)*

Present Employer: \_\_\_\_\_ Date Began: \_\_\_\_\_

Current Title/Responsibility: \_\_\_\_\_ Since (date): \_\_\_\_\_

### Previous Employment *(Past 10 years, beginning with present position.)*

Employer Title/Responsibility From To

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Professional and/or Personal Achievements *(What do you consider your highest achievement, responsibility or skill to date?)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

{continue on back}

**Community Involvement** (Please list, in order of importance to you, up to four community, civic, professional, business, religious, social, athletic and other organizations of which you are or have been a member.)

Organization	Position Held	Dates
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____

Briefly explain your interest in Leadership Westmoreland and what you hope to gain from your participation.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### References

Please list the names of two persons, other than your sponsor/employer, who are knowledgeable about your leadership potential and/or community involvements and who may be contacted regarding your qualifications as a participant.

1. Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_  
Relationship: \_\_\_\_\_

2. Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_  
Relationship: \_\_\_\_\_

### Not For Profit Organizations

Tuition Assistance Request (Maximum of two, \$500 scholarships available per class)

- I am not requesting tuition assistance.
- I am requesting tuition assistance in the form a \$500 scholarship from the Westmoreland County Chamber of Commerce. My essay is attached to this application.  Yes  No

### Candidate and Sponsor/Employer Agreement

I agree to the participant requirements of Leadership Westmoreland. I understand that my full participation in the retreat is required.

\_\_\_\_\_  
Candidate's Signature

\_\_\_\_\_  
Date

I support our candidate's participation in Leadership Westmoreland.

\_\_\_\_\_  
Sponsor/Employer's Signature

\_\_\_\_\_  
Date

*\* All applications are subject to confidential evaluation. If not selected, the application will remain on file for one year.*

Applications are due May 13, 2020. Acceptance notification will occur on or before June 12, 2020.  
A \$500 non-refundable deposit is due by July 13, 2020. Refundable balance is due by August 5, 2020. No refunds after August 12, 2020.  
Return application form and financial assistance essay, if desired, to: Leadership Westmoreland  
c/o Ms. Grace Markum, Facilitator • Westmoreland County Chamber of Commerce • 241 Tollgate Hill Rd • Greensburg, PA 15601