

Confidential Application



Date completed and mailed _____

Name _____

Age _____ Male _____ Female _____ Birthdate _____ Years in Clarksville _____

Business _____ Phone _____

Business Address _____

E-mail: _____ Fax #: _____

Home Address _____ Phone _____

Spouse's Name _____

Spouse's Employer _____

EDUCATION

(Begin with high school, then college(s), business or trade schools and / or other specialized training.)

Name and City of School	Dates from-to	Degree	Major
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

EMPLOYMENT

(Account for all periods including military active duty.)

Present Employer _____ Date began _____

Present Title or Responsibility _____

Since (Date) _____ How many days per month does your work require you to be out of the city? _____

Previous employment (in reverse chronological order)

Employer	Title or Responsibility	From	To	Reason for leaving
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

What do you consider your highest responsibility, skill or career achievement so far? _____

ORGANIZATIONS & ACTIVITIES

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

	Organization	Approximate Dates of Membership	Official Position Held
(1)	_____	_____	_____
(2)	_____	_____	_____
(3)	_____	_____	_____
(4)	_____	_____	_____
(5)	_____	_____	_____

What have you accomplished in these activities that you think is important?

How much time each month do you commit to community, civic, professional and other organizations and activities? _____

Have you been as active in community; civic, professional and other activities as you would like to be? _____
If not, what have been the major barriers to your becoming involved? _____

If you have previously not had the time or interest to become actively involved, what conditions have changes that now enable you to seek involvement in the community? _____

GENERAL

How long have you lived in Clarksville? If not a native, why did you move to Clarksville?

How would you describe your knowledge of community affairs?
_____ Poor _____ Fair _____ Good _____ Excellent

Your tuition will include the transportation, room and meal expense of the opening retreat. Full tuition must be paid by July 15, paid either personally or by your employer to Leadership Clarksville. Failure to do so will result in a forfeiture of your class place to an alternate. Tuition is non refundable if you withdraw or are dropped from the course. A limited number of partial scholarships will be available for hardship or unusual cases and will be considered only after the selection is made. Indicate if you need to apply for partial scholarship. _____ YES _____ NO

We must ask that participants commit to all of Leadership Clarksville's course. Are you and/or your employer willing to make such a September - May commitment? _____

Absenteeism will result in being dropped from the course and forfeiture of tuition. If you are unable to make a commitment, or if you have a conflict with the opening retreat, please do not apply at this time.

I understand the purposes of the Leadership Clarksville program and, if selected, will devote the time required.

***Enclosed is a letter of recommendation by:**

Names of two other references:

*Name _____

Company _____

Telephone _____

Applications must be received at the Leadership Clarksville office by the first Monday in May.

Applicant's Signature

IMPORTANT

A photograph (full face) and letter of recommendation must accompany application before consideration of selection is given.

Enclose photograph with application and return to:

**Leadership Clarksville
25 Jefferson Street, Suite 300
P.O. Box 883
Clarksville, TN 37041-0883
(931) 645-3322**