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| Leadership Rutherford logo.jpgClass of 2022 Application | | | | | | | | | | | | |
| 3050 Medical Center Parkway **Murfreesboro, TN 37129**  **Phone: (615) 893-6565 | Fax: (615) 278-2013** | | | | | | | | | | | | |
| This document is editable. The cells will expand to fit what you type.No handwritten applications will be accepted. | | | | | | | | | | | | |
| Last Name: | | | First: | | | | | | | | Middle: | |
| Gender: | Age: | | | | | Name you wish to go by: | | | | | | |
| Spouse: | | | | | | | | Years in Rutherford County: | | | | |
| Children (names & ages) | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| Home Address: | | | | | | | | | | | | |
| City: | | | | Zip Code: | | | | | | | | Birth month & date: |
| Cell Phone: | | | | | | | | | | | | |
| Email Address: | | | | | | | | | | | | |
| Business Email Address (we will use this email to contact you unless you tell us otherwise): | | | | | | | | | | | | |
| Business Name: | | | | | | | | | | | | |
| Business Address: | | | | | | | | | | | | |
| Business Phone: | | | | | | | Fax: | | | | | |
| EMERGENCY CONTACT INFORMATION | | | | | | | | | | | | |
| Name: | | Relationship: | | | | | | | | Phone: | | |
| Are there any special concerns/conditions that we need to be aware of? | | | | | | | | | | | | |
| Employment Information (Account for all periods including active military duty) | | | | | | | | | | | | |
| Present Employer: | | | | | | | | | Date Began: | | | |
| Title/Responsibility: | | | | | | | | | | | | Since: |
| What do you consider your highest responsibility, skill or career achievement so far? | | | | | | | | | | | | |
| PREVIOUS EMPLOYMENT | | | | | | | | | | | | |
| 1. Employer: | | | | | | From/To: | | | | | | |
| Title/Responsibility: | | | | | | Reason for Leaving: | | | | | | |
| 2. Employer: | | | | | | From/To: | | | | | | |
| Title/Responsibility: | | | | | | Reason for Leaving: | | | | | | |
| education (Begin with high school, include education and/or training beyond that ) | | | | | | | | | | | | |
| **Name of School and City/State** | | | | | | **Dates Attended** | | | | | **Degree/Major** | |
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| organizations and activities Please list (in order of importance to you) up to five professional, business, civic, community, religious, social, athletic or other organizations of which you have been a member and your leadership role in each. | | | | | | | | | | | | |
| **Organization** | | | | | **Length of Membership** | | | | | | | **Office Held** |
|  | | | | |  | | | | | | |  |
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| Regarding the activities above, what would you consider to be your biggest accomplishment? | | | | | | | | | | | | |
| Have you been as active in community, civic, professional or other activities as you would like to be? | | | | | | | | | | | | |
| If not, what have been the major barriers to your involvement? | | | | | | | | | | | | |
| GENERAL INFORMATION | | | | | | | | | | | | |
| What do you hope to gain from your Leadership Rutherford experience? | | | | | | | | | | | | |
| What are your chief hobbies and/or recreational activities? | | | | | | | | | | | | |
| Please respond to the following ***with more than one or two sentences***:  In your judgment: **What are the two most pressing problems (be specific) facing Rutherford County today? Explain why you think so and recommend solutions/alternatives for approaching and resolving these problems.**         **These stated problems are essential evaluations of your interest in Leadership Rutherford and will be incorporated into the active program material.** | | | | | | | | | | | | |
| Are you a registered and active voter? | | | | | | | | | | | | |
| Tuition for the Leadership Rutherford program is $1,000. Who will be responsible for tuition payment – you or your employer? | | | | | | | | | | | | |
| **Because there are more applicants for Leadership Rutherford than there are spaces, we must ask that participants commit to attending 100 percent of the year’s program.** *Absenteeism may result in being dropped from the program. This decision will be made at the discretion of the Leadership Rutherford Council.* ***If you are unable to make this commitment, it is not in your best interest to apply at this time.***  **Are you and your employer willing to make such a commitment from**  **September to June? \_\_\_\_\_\_\_\_\_\_** | | | | | | | | | | | | |
| * In the event of forces outside the control of Leadership Rutherford, such as but not limited to a natural disaster or pandemic, the structure of the program may change. Leadership Rutherford will make every effort to communicate changes to the schedule and format in a timely manner. * Tuition is non-refundable. | | | | | | | | | | | | |
| REMEMBER:   * **EMAIL** a high resolution digital headshot to [LRyan@rutherfordchamber.org](mailto:LRyan@rutherfordchamber.org) * **COMPLETE** all parts of the application * **EMAIL** the application to [LRyan@rutherfordchamber.org](mailto:LRyan@rutherfordchamber.org) | | | | | | | | | | | | |
| ALL APPLICATIONS must ***be received*** before 4:30 p.m. on May 28, 2021. | | | | | | | | | | | | |