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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) |
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| 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 activitiesPlease 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.** 1.
2.

**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.
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| REMEMBER:* **EMAIL** a high resolution digital headshot to LRyan@rutherfordchamber.org
* **COMPLETE** all parts of the application
* **EMAIL** the application to LRyan@rutherfordchamber.org
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|  ALL APPLICATIONS must ***be received*** before 4:30 p.m. on May 28, 2021. |