



## 2018-2019 LEADERSHIP MIDLOTHIAN APPLICATION

**Application Deadline is June 28, 2018**

**Name** \_\_\_\_\_  
**Last**                                  **First**                                  **Nickname**

Business Name \_\_\_\_\_

Business Address \_\_\_\_\_

Business Telephone \_\_\_\_\_ Email Address: \_\_\_\_\_

Home Address \_\_\_\_\_

Cell Phone \_\_\_\_\_

Name to be used on nametags \_\_\_\_\_

Business Title \_\_\_\_\_

Spouse's Name \_\_\_\_\_ Number of years in Community \_\_\_\_\_

**Education** (Please list most recent first)

School

Years Attended

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**Employment**

Length of service with current business/organization: \_\_\_\_\_

What do you do in your job? \_\_\_\_\_

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What do you consider your highest life or career achievement?

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**Previous Employment** (Please list most recent first)

**Employer**

**Title**

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**Organizations and Activities**

(List community, civic, professional, business, religious, social, and athletic organizations of which you have been a member, in order of their value to you.)

**Organization**

**Dates**

**Position Held**

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After graduating from Leadership Midlothian, in which community service organization would you like to serve?

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Is there anything else you want the selection committee to know about you?

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Please list two people the selection committee may contact for additional information about you.

1. Name \_\_\_\_\_ Title \_\_\_\_\_  
Email \_\_\_\_\_
2. Name \_\_\_\_\_ Title \_\_\_\_\_  
Email \_\_\_\_\_

**COMMITMENT STATEMENT**

*(initial to indicate acknowledgement of each requirement)*

I agree to the following guidelines for Leadership Midlothian. I understand that to graduate from Leadership Midlothian, I MUST:

\_\_\_\_\_ Attend one full day each month for ten months, as scheduled (see attached schedule)

\_\_\_\_\_ Attend the state government trip to Austin

\_\_\_\_\_ Participate in the group's service project

*I have cleared my calendar to participate in the 2018-2019 Leadership Midlothian Program. I commit to attending all sessions. If applicable, I have my employer's support as indicated below. If selected, I will devote the time and resources necessary to complete the program. I understand that a participant who misses more than eight hours (equivalent of 1 full day) may be asked to withdraw from the program. Participant may be eligible to complete make-up sessions for missed class time.*

Applicant Signature

Date

**EMPLOYER COMMITMENT**

This applicant has the approval of this organization to participate in Leadership Midlothian 2018-2019. The applicant has our full support, which includes the time required to participate in the program. We also agree to pay the tuition costs for this applicant to participate in the program.

\_\_\_\_\_ \$500 (Chamber Member)

\_\_\_\_\_ \$750 (Non-Member)

Name/Title \_\_\_\_\_

Date \_\_\_\_\_

Signature \_\_\_\_\_

\_\_\_\_\_ My company will donate \$\_\_\_\_\_ to a scholarship program for eligible Leadership participants whose business may not be able to afford the full cost of the program. Leadership Midlothian provides half scholarships to up to (2) eligible participants per program year.

**Please submit application with required tuition by Friday, June 28, 2018. (Tuition for applicants who are not selected will be refunded in full).**

**Make checks payable to:  
Midlothian Chamber of Commerce, 513 South 9<sup>th</sup> St., Midlothian, TX 76065.**

***Deadline to apply is June 28, 2018***