

LEADERSHIP CONWAY

2007 Application

Due Date: December 1, 2006

Leadership Conway is sponsored by the Conway Chamber of Commerce. The program began in order to provide existing and emerging leaders with opportunities to enhance their civic knowledge and civic network. For over a quarter of a century, this program has helped participants better understand how our community works, build relationships with the area's current and future leaders and become inspired to focus talents in a way that will best serve the community. Leadership Conway participants develop the leadership skills necessary to assume leadership roles and also become exposed to the involvement opportunities in the community.

Please complete each section in full. Type or print in black ink. Please note that class size is limited to 25 participants.

Personal Information:

Name: _____ Preferred Name: _____

Employer: _____ Title : _____

Preferred Mailing Address: _____

Daytime Phone: _____ Evening Phone: _____

Email: _____ Fax: _____

The responsibilities of my position include:

Optional Personal Information:

Sex: _____ Race: _____ Date of Birth: _____ Spouse/Children: _____

Hobbies/Interests: _____

Education:

High School: _____ Location: _____ Diploma/Year: _____

College: _____ Location: _____ Diploma/Year: _____

Post Graduate Work: _____ Location: _____ Diploma/Year: _____

Educational accomplishments, honors or recognition:

Community and Professional Development:

Please list recent volunteer activities in reverse chronological order beginning with most current commitments. Include community, civic, religious, government, social, athletic, or other volunteer involvement. Information provided should include the following; Organization name, dates of involvement, # of hours volunteered per month, and a description of activities. Note: If no activities to list, please describe what activities/organizations you would consider becoming involved in within the next year.

Why do you think it is important to be involved in community organizations?

What of importance do you feel you have accomplished in the community activities listed above? If no activities, please describe what you feel you could accomplish through your volunteer service.

Are any of the community activities listed above required by your employer? Explain if applicable:

General Information:

Why do you wish to participate in Leadership Conway?

What do you believe is the role and responsibility of a community leader?

What do you feel are your strengths as a leader?

What do you hope to gain/benefit from your participation in Leadership Conway?

Is there any additional information you would like to provide when considering this application?

Commitment:

Participants may not miss more than one session in order to graduate and attendance at the retreat is mandatory. In addition, participants will be required to take part in enrichment activities and a class project. Please indicate your acceptance of this commitment below.

You and your employer's signatures below indicate that you both understand the following; (1) you (the applicant) can make the attendance commitment and (2) you have the support of your employer.

Please indicate you and your employer's understanding of the attendance policy listed above by signing below: (Both must sign to be considered for the program).

Applicant's signature

Date

Employer's signature

Date

Tuition:

Tuition for each participant in the Leadership Conway program is **\$350**. Full payment must be made by December 31, 2006. Please indicate below

____ Tuition Fee of \$350.00 is enclosed ____ Please Invoice

**Return by December 1, 2006 to
Conway Area Chamber of Commerce
PO Box 831, Conway, SC 29528
Or Fax To: 248-0003**