



**What do you consider your highest accomplishment or leadership achievement to date?**

---

---

**General Information:**

Briefly state why you want to participate in the Leadership West Bend program: \_\_\_\_\_

---

---

---

**Tuition and Funding:**

If accepted into the Leadership West Bend program, you or your company will be billed for the tuition of \$800 (Chamber Member) or \$1,600 (Non-Member). Tuition covers all program materials, including retreat, speaker costs and meals. Partial financial assistance is available, not to exceed 50% of the tuition cost. Scholarships will be awarded based on individual need, the number of scholarship applications, and available funds. For a scholarship application and more information, please contact Cheryl Plankey at (262)338-2666.

**Other Information:**

Do you have any dietary or physical restrictions? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please explain: \_\_\_\_\_

---

**Candidate Commitment:**

**Meet & Greet:** An Meet & Greet is part of the application process. Applicants will be contacted to set up an appointment.  
**Attendance:** To graduate from the Leadership West Bend program, a minimum of 90% attendance is required throughout the program. Absenteeism will result in being dropped from the course without graduation. Program tuition is not refundable. If you are unable to make a commitment at this time, it is not in your best interest to apply for consideration.  
**Community Projects:** In addition to the classes, you will be asked to commit your time to a small group community project. The amount of time you will need to devote to the project will be determined by the consensus of your group.

**I understand the purposes of the Leadership West Bend program and will devote the time and energy necessary to complete all aspects of the program including attendance and the community project. My employer and I are willing to make this September to May program commitment.**

---

*Candidate Signature*

*Candidate Printed Name*

*Date*

**Employer Commitment (if applicable):**

This candidate's application has the approval of this organization and the applicant has our full support which includes the time commitment required to participate in all aspects of the Leadership West Bend program.

---

*Employer Signature*

*Employer Printed Name*

*Phone*

*Date*

**Application and payment must be returned by Noon on Friday July 5, 2019 to:  
West Bend Area Chamber of Commerce, 304 South Main Street, West Bend, WI 53095,  
email: cheryl@wbachamber.org**

**Potential candidates will be notified after the application deadline. Interviews will be conducted in August.  
Class size is limited ... early registration is suggested.**

Received: \_\_\_\_\_

*(Office Use Only)*

1/2019