

Mission: "Identify, develop and educate a diverse group of leaders to ensure economic success for the Thomasville-Thomas County community."

WHO WE ARE

Leadership Thomas (LT) is a program of the Thomasville-Thomas County Chamber of Commerce. LT cultivates a diverse network of emerging and experienced leaders committed to improving the community. With the support of LT graduates and the business community, LT has conducted leadership programs since 1981.

BENEFITS

Participants will:

- Interact with leaders from the various sectors of our community (business, government, nonprofit)
- Learn from "unlike" minded people to build strong professional relationships
- Develop an awareness and participate in discussions of the challenges and opportunities in the community by examining major relevant business, government and social issues
- Enhance understanding of your personal leadership style to grow into higher-level roles, both in the work place and in the community
- Deepen your company's profile with community, business and government leaders through visibility and commitment to community success
- Learn how you can make a difference in the Thomasville-Thomas County area

TUITION - SCHOLARSHIPS - PAYMENT PLANS

- Tuition for Leadership Thomas is \$1,000 for Chamber members and \$1,500 for all nonmembers. Cash, check or credit card accepted. Tuition payment plans are available.
- Partial scholarships are offered based on need.
 Requests are submitted with the LT Class application.

SELECTION CRITERIA

Leadership Thomas seeks those candidates who:

- Demonstrate leadership attributes through career achievement or participation in community activities
- Represent a cross-section from businesses, government and non-profit organizations
- Reside and/or work in Thomasville-Thomas County
- Identify and analyze challenges considering various perspectives, then provide solutions
- Share personal/professional resources/expertise
- Value continuous learning and personal and professional development

PROGRAM COMMITMENT

- Have full support from their sponsoring organization/business
- Give the time necessary to complete the program
- Maintain a personal commitment to Thomasville-Thomas County and to Leadership Thomas after graduation

CURRICULUM

The program begins with orientation in June, followed by a weekend retreat in August, continues with 9 monthly sessions—Sept. through May—and a closing graduation in June. The sessions present activities and hands-on experiences related to leadership topics i.e.: economic development, government, the arts, healthcare, human services, justice, law enforcement and the environment.

REQUIREMENTS

Attendance at the opening retreat and closing graduation is mandatory. Participants must attend monthly day-long sessions and participate in a class project.

- Class 37 Meet and Greet will be held Thursday, July 25 2019 from 5 to 7 p.m.
- Class 37 Opening Retreat will be held from
 Friday, August 16 to Sunday, August 18, 2019
- Class 37 Graduation will be Thursday, June 11, 2020 (time TBD)
- Class 37 Session Dates (must attend 7 out of 9):
 - Thursday, September 5, 2019
 - Thursday, October 3, 2019
 - Thursday, November 7, 2019
 - Thursday, December 5, 2019
 - Thursday, January 9, 2020
 - Thursday, February 13, 2020
 - Thursday, March 12, 2020
 - Thursday, April 9, 2020
 - Thursday, May 14, 2020

APPLICATION PROCESS

- Only 15 participants are selected on their own merit from written applications submitted to the Leadership Thomas Selection Committee.
- This application may be found online by visiting
 - www.thomasvillechamber.com/leadership
- Applications are due by 5:00 p.m. on Tuesday, April 30, 2019.
- Applicants are notified in early May of acceptance. Those candidates not accepted are strongly encouraged to re-apply in subsequent years.

FOR MORE INFORMATION, CONTACT:

Andrea Collins, Executive Director andrea@thomasvillechamber.com OR Christina Reneau, Assistant Director christina@thomasvillechamber.com 229.226.9600

APPLICATION INSTRUCTIONS: Please follow these instructions carefully. Your application is the sole basis for consideration by the Selection Committee and failure to follow these instructions will adversely affect your standing in the selection process.

- Complete each section.
- Applications can be either typed or hand-written. Application should be submitted with a typed and signed Letter of Recommendation. Letter of Recommendation may be scanned and emailed with application or mailed/delivered to the Chamber with application. Limit responses in application to available space. Applications may be submitted electronically to christina@thomasvillechamber.com or mailed to PO Box 560, Thomasville, GA 31799. Hand deliveries go to the Chamber office at 401 South Broad Street.
- Only one letter of recommendation will be accepted. No other attachments will be considered.
- Application must contain recent photograph suitable for use in publications and for publicity in a
 digital format. Please email these to christina@thomasvillechamber.com with Leadership Thomas
 and your name in the subject line.
- All application materials—Application (including signatures by the applicant, employer, and Leadership Alumnus), Letter of Recommendation, and Photo—must be postmarked, emailed or hand-delivered to the Chamber by 5:00 p.m. on Tuesday, April 30, 2019.

(APPLICATION BEGINS ON NEXT PAGE)

LEADERSHIP THOMAS CLASS 37

Confidential Application due by 5:00 p.m. on APRIL 1, 2019

I.	PERSONAL D	ATA Date:
Nam	ne (First, Middle Initia	l, Last):
Nam	ae Called by:	Gender:
Date	of Birth:	Length of Residence in Thomasville area:
Emp	oloyer:	
Title	or position:	
Desc	cription or type of orga	anization:
	ness Mailing Address: et/box, city <u>, zip code</u>)	
Busi	ness Phone:	Mobile Phone:
Ema	il:	
Date	Employed:	
Gene	eral Responsibilities:	
	ne Address: et, city, <u>zip</u>)	
Hon	ne Phone:	
Spou	ıse:	Number of Children:
Inter	rests:	

C. Business/Professional Affiliations do not include civic organizations, public office or political activities:

Positions Held or Assignments

Dates: (from/to)

Name of Group

TY COMMINITY INVOLVEMENT

IV.	COMMUNITY INVOLVEMENT

Organization:	Assignment/Position:	Responsibilities:	Dates (from/to)	
B. List additional sign involvement:	nificant community, civic, religious, p	political, government, social,	athletic or other areas of active	
C. What do you cons	sider your most important accomplis	hment in one of the above o	organizations? Why?	
D. How much time e	each month do you commit to volunt	eer work?		
E. List the kinds of vo	olunteer activities in which you would	d like to become active in th	e future.	
F. If you have not had seek involvement in the		vely involved, what condition	ns have changed that now enable you	to

Name:	
v.	GENERAL INFORMATION
	of the goals of Leadership Thomas is to establish relationsh

One of the goals of Leadership Thomas is to establish relationships among community leaders who can enhance their leadership attributes and problem-solving abilities through shared perspectives and working together.

A.	Assess your personal leadership capabilities by describing a situation where you demonstrated leadership in the last 2 years.
В.	List three major challenges facing the Thomasville-Thomas County area today.
C.	Give your recommendations for addressing one of the above major challenges.
D.	What specific skills/knowledge do you hope to gain from your participation in Leadership Thomas?
Е.	If you had the opportunity to address the Selection Committee and describe yourself and why you should be selected for Leadership Thomas, what would you say?

Name:		
VI. REFERENCES		
List two references who can attest	to your present and/or potential leadership abil	ity:
Name	Email	Phone
Name	Email	Phone
> Submit one letter of reco	ommendation from someone other than the per	rsons listed in Section VI., above.
VII. COMMITMENT		
To graduate from LEADERSHIE	THOMAS, a participant is expected to attend	ALL sessions.
PARTICIPANT COMMITMEN	T	
and if I am selected I will devote t member of the alumni group after will review my attendance and I m	LEADERSHIP THOMAS as outlined in the Inhetime and resources necessary to complete the graduation. I acknowledge that if I miss two seasy be asked to withdraw from the program and ents and agree to be bound by them in signing the significant of the program and the program are program as the program and the program are program and the program are program as the program are program and the program are program are program and the program are program and the program are program are program are program and the program are program and the program are program and the program are program are program and the program are program are program are program are program and the program are program are program and the program are program ar	e class program and become an active ssions, the Leadership Thomas Committee no portion of the tuition shall be refunded.
Applicant Signature		Date
EMPLOYER COMMITMENT This application has the approval to participate in the class program	of this organization and the candidate has our f	ull support, which includes the time required
Signature		 Date
Printed Name and Title		<u></u>
Company/Organization		
NOMINATING ALUMNUS		
	of myself and the candidate has my full suppor	ī.
Signature		 Date
Printed Name and Title		<u> </u>
Company/Organization		

TUITION - SCHOLARSHIPS - PAYMENT PLAN

	pted into Leadership Thomas, it is your responsibility to make arrangements for tuition payment. You will be invoiced tuition fee, which covers all program costs and is non-refundable. Tuition will be paid by:
	Employer
	Participant
	Other (please specify)
Will yo	ou need a payment plan? Yes No
	ou need a scholarship to participate in the class program? Yes No please complete the form below.
R re m pa	CHOLARSHIP APPLICATION (COMPLETE THIS SECTION ONLY IF YOU ARE EQUESTING FINANCIAL ASSISTANCE). The LT Committee encourages scholarship quests. Every effort is made to grant at least a partial scholarship award, based on need. Requests ust be made on the scholarship application form and submitted with the LT application. A syment plan for tuition may be arranged for the balance due and MasterCard and Visa are cepted.
Name	::
Phone	2:
Mobil	e Phone:
Addre	ess:
Email	:
Comp	pany:
Positi	on:
Marita	al status: Number of dependents (if applicable):
Will l	ack of a scholarship prevent you from participating in the class program? Yes No
Amou	ant requested:
Will a	my portion of the participant's fee be paid by your employer? Yes No
In a b	rief statement below please state why you should be awarded scholarship assistance.