



ENROLLMENT APPLICATION

Please type or print and limit answers to the space provided. Successful applicants are involved in their communities and have demonstrated leadership or potential for leadership in middle Tennessee. Be sure your application identifies these characteristics in order that the selection committee can give your application full consideration. Please include a picture (headshot) with your application. (Leadership Middle Tennessee participants are selected without regard to sex, race, age, national origin, or handicap status.)

1. PERSONAL INFORMATION

Last name	First	Middle	Preferred name
Home address	City	Zip	Phone/Cell Phone
Employer (if applicable)			Position/Title
Employment address	City	Zip	Phone
e-mail address: _____	Preferred mailing address (circle one):	Home	Employment
Are you a registered voter? _____ (Y or N)			

2. PARTICIPATION

In order to accomplish our objectives, full participation of each individual selected is necessary. **The 2012-2013 schedule is as follows:**

Session #0	September 13	Davidson County - Orientation/Regionalism
Session #1	September 19-20	MTSU and Rutherford County
Session #2	October 17-18	Sumner County
Session #3	November 14-15	Montgomery County
Session #4	December 12-13	Maury County
Session #5	January 16-17	Robertson County
Session #6	February 20-21	Davidson County
Session #7	March 6-7	Dickson County
Session #8	March 20-21	Williamson County
Session #9	April 17-18	Wilson County
Session #10	May 8-9	Cheatham County
Graduation	May 14	TBA

Will you be able to attend all sessions? _____yes _____no

Do you have the support of your employer for the time required to participate in Leadership Middle Tennessee?

_____yes _____no _____not applicable

The Board of Directors encourages up to **two** letters of reference in support of your application to be sent to the address indicated. References that address specific community and/or regional leadership abilities or the potential to show leadership abilities are the most useful. Please identify the names of your references so we can assure when your application is complete.

_____ and _____

To be eligible for consideration into the program, applications and letters of reference must be received in the Leadership Middle Tennessee office no later than **Friday, May 25, 2012.**

3. ORGANIZATIONS AND ACTIVITIES

Please list in order of importance to you five community, political, professional, civic, business, religious, social, or other organizations in which you have provided leadership (leadership not limited to officer position.)

Activity/Organization	Dates	Responsibilities and/or Title of Positions Held

What achievements were you able to make in these activities that you feel are important?

Have you been as active in community, civic, professional, and other activities as you would like to be? _____ If not, what have been the major barriers to your becoming involved?

Graduate of other Leadership programs. Please list name and date.

4. ACHIEVEMENTS

To include title and brief description of honors and recognitions you've received:

5. EDUCATION

Please identify your formal educational background, training and continuing education experiences. (i.e., institutions attended, degrees earned)

Degree	Major	Year	Institution

Other Educational Experiences:

6. PREVIOUS EMPLOYMENT

Employer	Title or Responsibility	From/To	Reason for Leaving

(If more space is needed, please attach a separate sheet)

7. HOBBIES

What are your chief hobbies, interests, and recreation activities?

8. REGIONAL ANALYSIS

How long have you lived or worked in middle Tennessee? _____ years

Identify a particular challenge, issue, or problem you feel is critical to middle Tennessee. No solutions. (Limit your answer to space below)

9. EXPECTATIONS

What do you believe you can gain from participating in Leadership Middle Tennessee?

What do you believe you can contribute to Leadership Middle Tennessee?

10. TUITION

Tuition for Leadership Middle Tennessee is \$600. I understand if I am selected to participate, tuition is to be paid by me or a sponsor prior to the start of the program. I realize I am responsible for paying lodging and transportation costs for each session when applicable.

Signature of Applicant

Date of Application

I fully support the above applicant in this program.

Employer/Supervisor

Date

SEND APPLICATIONS AND REFERENCES TO:

Susan Turner Taylor, Executive Director
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