



## LEADERSHIP UNION 2009-10 APPLICATION FORM

**INSTRUCTIONS:** Please complete each section in full. Type or print please. One letter of recommendation will be accepted. No other attachments will be considered. Application must be signed by both sponsor (if applicable) and candidate. *Graduates are eligible for 6.2 CEUs. CPAs receive 60 CPEs.*

**SELECTION CRITERIA:** Application to Leadership Union is open to persons living or working in Union County. Up to 25 individuals will be selected to participate in the program.

Leadership Union is committed to a diverse and dynamic membership.

Class members are chosen by the Leadership Union Selection Committee which seeks representation from a cross section of the community, including business, education, the arts, religion, government, community-based organizations, ethnic and minority groups.

Nominees must have the full support of the organization or corporation they represent. Individuals may nominate themselves.

Attendance at the retreat is required, as well as at the all-day monthly sessions. Absences due to extenuating circumstances will be referred to the Leadership Union committee. Following more than two absences, the participant will be invited to make up any missed sessions with next year's group. Graduation for that participant will then be with the group from the next year. Half-day attendance and early departures will be counted as half-day absences.

In reviewing applications, the Selection Committee looks for potential participants who demonstrate the following criteria:

- Commitment and motivation to serve the Union County area.
- Policy shaping responsibility or position of leadership in employment and/or volunteer organizations resulting in the potential to have significant influence on important issues facing the community.
- Ability to make the time commitment required by the program.

Tuition for the program is \$600. Limited tuition assistance may be available; inability to pay for the program should not prevent an applicant from submitting a form. Remittance of tuition (payable to the Union Vision for Progress, Inc., a chamber sponsored 501(c)3 is required prior to the beginning of classes.

**Sponsored by**

**In Collaboration With**



South Piedmont  
COMMUNITY COLLEGE



**PROFESSIONAL/BUSINESS AFFILIATIONS**

Name Position/Responsibility

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Highest Responsibility, Skill or Career Achievement to Date: \_\_\_\_\_

\_\_\_\_\_

**COMMUNITY INVOLVEMENT**

Do not include business/professional affiliations.

Organization Position Held From/To

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

If you have not had the time or interest to become actively involved, what has changed that now enables you to seek involvement in the community?

\_\_\_\_\_

**GENERAL INFORMATION**

What do you feel are the three most significant problems facing Union County today?

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

What do you feel needs to be done on one of these issues? \_\_\_\_\_

\_\_\_\_\_

What are the three greatest opportunities Union County has to offer?

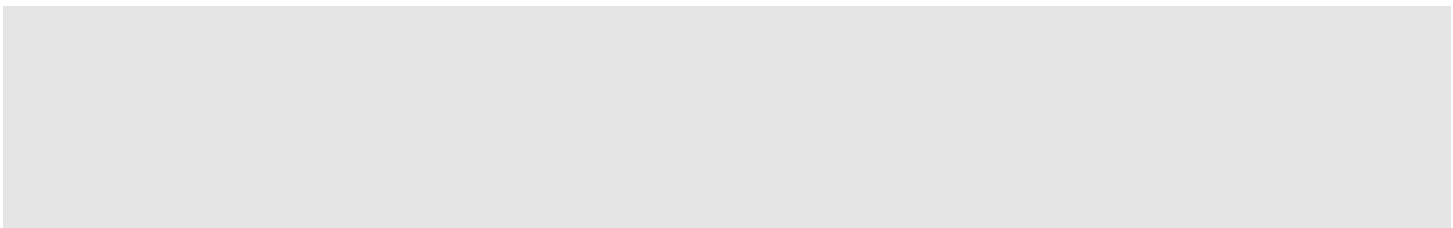
1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

What do you feel needs to be done to develop one of these? \_\_\_\_\_

\_\_\_\_\_



## REFERENCES

|         |              |       |          |
|---------|--------------|-------|----------|
| Name    | Relationship | Phone |          |
| Address | City         | State | Zip Code |
| Name    | Relationship | Phone |          |
| Address | City         | State | Zip Code |

## COMMITMENT

The retreat (required) is an overnight session held in August. All-day sessions are normally held third Tuesdays every month. In June, a bus trip to Raleigh will be scheduled to meet with our local delegation.

Will you be able to fulfill these commitments? \_\_\_\_\_

Do you wish to apply for tuition assistance? Information and forms will be mailed to you. \_\_\_\_\_

I understand the goals and commitments of the Leadership Union program. If selected, I will devote the required time and pay my tuition prior to orientation.

\_\_\_\_\_  
Applicant's Signature Date

## SPONSOR

This applicant has my full support to participate in LEADERSHIP UNION. I am aware of the time commitment involved for his/her effective participation, as well as the financial obligation. (This should be signed by the applicant's manager.)

\_\_\_\_\_  
Sponsor's Signature Date

\_\_\_\_\_  
Title Agency/Company

Send the application to:

**LEADERSHIP UNION**  
**P. O. Box 1789**  
**Monroe, NC 28111**