



Confidential Application

(Please Type or Print Clearly)

Personal Data

Last First M.I.

Home Address

City/State/ZIP Home Phone

Business/Organization

Business Address

City State ZIP

Business Phone Cell Phone Email

Name of President or CEO

Current Position/How long with company

Sponsoring Organization (if different from business)

Address

City State ZIP

Phone Name of President or CEO

Education & Experience

State your educational and professional background including degrees awarded, field(s) of study, professional experience, institutes, training programs, etc. (You may attach a resume or separate sheet to answer this question.)

Tuition

Tuition for the Leadership Jones program is \$300.00 per participant. Tuition covers all program costs, meals and materials. A limited number of partial scholarships are available to those who cannot pay the full tuition. Scholarships are awarded based on need and class composition. Tuition is due in full by August 21 unless prior arrangements have been made.

_____ Full tuition of \$300.00 can be paid

_____ I request scholarship assistance (please explain how much is needed, why and specific \$ amount)

References

List two persons who have knowledge of your qualifications to be a Leadership Jones participant.

1. Full Name & Title	Phone	
Business or Home Address	City	ZIP
2. Full Name & Title	Phone	
Business or Home Address	City	ZIP

Cancellation & Refund Policy

1. Cancellation must be made in writing and received by the Leadership Jones Administrator by 5:00 p.m. on the dates specified below.
2. Cancellation on or before May 11 will be given a full refund of any tuition paid.
3. Cancellation after May 11 but two days prior to the first class session will be given a 50% refund of the full tuition amount minus any scholarship money provided to the candidate.
4. Cancellations any later than the above will be given no refund.
5. Even though circumstances do arise, any participant missing more than one sessions may not graduate with the class, and no portion of tuition will be refunded.

Employer Authorization

Full support from the applicant's employer is necessary to be able to effectively participate in Leadership Jones. I have approved the submission of this application and the time and any financial commitment required on our part for the applicant to participate in Leadership Jones. I have read and understood the Cancellation & Refund Policy stated on the following page.

Employer Signature

Date

Goals

Please identify and discuss a particular issue, opportunity, or problem you feel is crucial to the Jones area.

How would you expect to use your Leadership Jones experience?

What can you contribute to the program?

Community Involvement

Please list the civic activities that you have participated in during the last five years. For each activity, indicate the nature of your participation. If you have not been involved in any civic activities, please explain why.

Organization/Activity	Involvement
Organization/Activity	Involvement
Organization/Activity	Involvement

Commitment

In order to accomplish Leadership Jones's objectives, the full commitment and participation of each individual selected is necessary. Participants are expected to attend all sessions including:

- 1) Meet & Greet – May 24 (mandatory attendance).
- 2) One full weekday each month from May-November.
- 3) Four Out of Class Activities
- 4) Class project and community experiences required independent of class sessions.

If selected, I am fully prepared to be an active participant and devote the time and energy required to complete the Leadership Jones program. I have read and understood the Cancellation & Refund Policy.

Applicant Signature

Date

Application Deadline

Application must be received at The Jones County/ Gray Chamber of Commerce by May 1, 2018.

The Jones County Chamber of Commerce
P.O. Box 686
Gray, Ga 31032

Phone: 478-986-1123
Fax: 478-986-1022
Email: haley@jonescounty.org

