APPLICATION CLASS OF 2024-2025

LEADERSHIP KATY

To apply for Leadership Katy, please complete form

Applicants Name:

Date:

Personal Information | This will be used for flights, background checks, and additional planning.

Full Name (As it appears on license):	E-Mail:	
Name for Nametag:	Cell Phone:	
Date of Birth: Age:	Ethnicity:	Gender:
Home Address:		
Place of Birth:	License Number:	State:
Active Military or Veteran Years Lived in Katy: Yes No	Social Security Nur	mber (Washington DC tours):
Education Information		
High School:		Graduation Year:
College:	Major:	Graduation Year:
Graduate School:		Graduation Year:
Emergency Contacts:		
Full Name:	Relationship:	Phone:



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Empl	ovment	Intor	mation
спр	oyment		mation

Employer:	Title:
Work Email:	Work Phone:
Business Address:	
Year of Hire: Professional Trainings:	
List Civic, Professional, and Religious Organizat	ions:

Tuition and Funding | Application Agreement

Tuition and Funding: If accepted into the Leadership Katy program, you and/or your company, will be billed \$2,800 for the tuition fee if you are a Katy Area Chamber member. Prospective members will be billed \$3,500. The tuition covers all costs including airfare, transportation, meals, and hotel accommodations*. Applicants will be notified of their acceptance by the end of July 2024. Tuition is due in full by the start of the program in August 2024 or by an agreed upon payment plan by December 2024. <u>Withdrawal from the program at any time, for any reason, will not create cause for return of any portion of tuition paid.</u> If withdrawal happens while applicant is on a payment plan of any kind, tuition is still to be paid in full.

*Private Rooms are available for an additional cost which is based on contracted room rates during booking times for Leadership Katy

Application Agreement: I have completely answered each of the application questions and to the best of my knowledge, the answers to the foregoing questions are true and correct. I understand that attendance at all of the retreat sessions are mandatory. I also understand that attendance at all local sessions are expected. I understand that the program will be delivered in six or seven full-day (8 hour) sessions and four two-day out-of-town sessions from August through May. I accept that missing any retreat session or more that two local sessions will disqualify me from graduation; and that this is a professional continuing education program and should be taken seriously. I further understand that the program encourages continued Katy Area Chamber and community involvement following graduation.

Applicants Name:	Applicants Signature:	Date:
time requested for participat	roval of this organization and the applicant h ion as detailed in the application agreement ition and funding as state above.	A DECEMBER OF A
Employer Name	Employer Signature:	Date:

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Please rate your current skills/knowledge on the following topics...

Name:	Poor 1	2	3	4	5 Great
Communication					
Critical Thinking					
Team Building					
Strategic Planning					
Leadership Development					
City Government					
County Government					
National Government					
Community Development					
Economic Development					
Infrastructure					
Healthcare					
Education					
Community and Non-Profit Development					

Leadership Katy Program Calendar

2024

August 22Class Welcome Reception (Katy, TX)September 5-6Opening Retreat (New Ulm, TX)October 2Municipal Government & Infrastructure (Katy, TX)November 6County Government & Economic Development (Katy, TX)December 4Community & Cultural Awareness (Katy, TX)

2025

January 23-24 State Government (Austin, TX) February 5 Education (Katy, TX) March 5-7 National Government (Washington DC) April 2 Healthcare (Katy, TX) May 8-9 Ending Retreat & Graduation (Galveston, TX)