

4. INFORMATIONAL GATHERING *While this information is not part of the selection process, we ask that you answer the following questions to help us tailor the program to current Leadership needs.*

Provide a brief statement of the reason(s) you wish to participate. (What you are most interested to learn? Where are you looking forward to visiting?)

In your opinion, what are the three most critical problems/issues facing the Sikeston Region today?

1. _____
2. _____
3. _____

5. EMPLOYERS AGREEMENT

I fully support the applicant _____ for the 2024 Leadership Sikeston program, and I represent that his/her employer is willing to make available the necessary time for full participation in **all scheduled classes and activities**.

Signature: _____ Date: _____

Print Name: _____

6. APPLICANT'S AGREEMENT

If selected as a participant in Leadership Sikeston, I am willing to attend all functions sponsored by the program, and I understand **attendance is mandatory**. I understand if I fail to meet any obligations of the program, I may be asked to withdraw and may not graduate with my class. I understand I am to notify the Chamber office when I am unable to attend a session. **I understand that if I miss more than one session, I will need to make up the session the following year in order to graduate.**

Signature: _____ Date: _____

7. TUITION

If accepted into the Leadership Sikeston program, you or your organization will be billed for **the tuition fee of \$500 for Sikeston Regional Chamber members or \$600 for non-Chamber members**. Tuition covers supplies, meals, transportation, and speakers during the sessions **Tuition must be paid in full by March 1, 2024 and is non-refundable.**

My tuition will be paid _____ personally _____ by my organization

To be considered, this completed application must be returned to the Sikeston Regional Chamber by noon on January 31, 2024. Participants will be notified of acceptance no later than end of business February 2, 2024.

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