

# **Our mission: The Wells County Leadership Academy will develop, cultivate and enhance**

# **leadership skills for individuals in our community.**

**2024-2025 Year**

# Application for Participation

**WCLA Level 1**

**Cost: $800**

**Instructions:**

* Please complete each section in full
* Print in black ink or type
* Limit answers to space provided
* Send completed applications by **June 7, 2024** to:

Wells County Leadership Academy, c/o Wells County Chamber of Commerce

211 W. Water St., Bluffton, IN 46714

***Acceptance notification letters will be mailed the week of July 22, 2024.***

## Personal Data

Name ❒ Mr. ❒ Ms. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone (h) E-mail Address (h) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Years of work or residency in Current County \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Employment

Employer Occupation \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone (w) E-mail Address (w) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of immediate supervisor \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Education

Highest level of education: ❒ High School ❒ College ❒ Some College

## Community Involvement

Please list organizations in which you are involved, your responsibilities, and the length of time you have participated.

If you are not currently involved in community activities, please list areas of interest.

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What do you consider to be your most meaningful community service responsibility to date?

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**Over Please…**

**General Information**

What do you hope to gain from participation in WCLA and how do you expect to utilize your experience?

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Check the category which best describes the area in which you presently work/serve:

❒ Corporate/Large Business ❒ Law ❒ Education

❒ Finance ❒ Government ❒ Healthcare

❒ Small Business ❒ Community/Non-profit ❒ Other

**Scholarship Availability**

Corporate and community support makes it possible for the WCLA to offer a limited number of partial scholarships. These are generally for partial tuition and awarded to those most in need. Acceptance into the program is not dependent upon source of tuition.

For individuals in an Agriculture related industry, there is a special scholarship that may be available.

All scholarship applications are available upon request. Please contact Erin Prible at eprible@wellscoc.com or

(260) 824-0510 for further information.

**Commitment**

Attendance at each session is imperative to the successful completion of the WCLA. Participants who accrue more than two absences must meet with the Facilitator, who will make a determination regarding the participant’s ability to successfully complete the program. The WCLA (session one) will commence on September 13, 2023. No tuition refunds will be granted following September start date. If selected as a participant, I agree to attend the program sessions, complete assignments as required and participate in any project. **WCLA Level 1 will meet the second Wednesday of each month (September – May) from 8 a.m. – 12 p.m.**

Signature Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Business or Organization Commitment (if applicable)**

This candidate has my full support to participate in WCLA. I am aware of the time commitment involved, as well as the financial obligation. The WCLA (session one) will commence on September 13, 2023. No tuition refunds will be granted following that date.

Signature \_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name \_\_\_\_\_\_\_\_\_\_\_\_ Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Company/Organization \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Supervisor Email Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Level 1 of the Wells County Leadership Academy contains six Habitudes plus supplementary sessions to further enhance learning. An additional six Habitudes and other topics are continued in Level 2.