

GOLD

Greater Ozarks Leadership Development

CONFIDENTIAL APPLICATION

Class of 2008 - 2009

PERSONAL DATA

Name: _____ Preferred First Name: _____

Company/Organization _____

Preferred Mailing Address: _____

(This address will be used to mail all important materials and will be made available to all class participants.)

City: _____ County: _____ Zip Code: _____

Business Phone: () _____ Fax: () _____

Preferred E-mail: _____

Date of Birth: _____

Please Indicate any Special Dietary or Health Needs: _____

Present Title or Responsibility: _____

Length of Time with Employer: _____

Supervisor: _____

Please be certain that your supervisor/employer approves of your participation in Greater Ozarks Leadership Development. **Attendance at all sessions is a requirement!**

SESSION DATES FOR 2008 – 2009 CLASS

Classes will meet monthly, at locations throughout the region, from 9 a.m. to 4 p.m. Dates: October 3 & 4 (Opening Retreat), November 12, December 10, January 14, February 11, March 10 & 11 (Capitol Visit), April 8, May 13, June 10 (Graduation Banquet.) Session days will cover topics such as Economic Development, Funding Resources, Education, Workforce Development, Infrastructure, Quality of Life, Leadership Skills, and Communications.

EDUCATION

Please enter name of schools attended (including high school, college(s), trade schools, and other specialized training), city where located, and any degree attained.

Name of School	City	Degree
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

ORGANIZATIONS & ACTIVITIES

Please list, in order of importance to you, the community, civic, professional, religious, social, athletic, and other organizations of which you are or have been a member.

Organization	Current/Past Position	Length of Membership
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

GENERAL INFORMATION

What do you consider to be your most significant professional contribution? Explain why you consider it to be significant.

What do you consider to be your most significant community contribution? Explain:

What do you hope to gain from your participation in Greater Ozarks Leadership Development?

What issues are you passionate about in your life?

Identify one significant issue facing Southwest Missouri today. Explain why you chose this issue.

COMMITMENT

A. Tuition

Tuition is \$695, which includes lodging for two overnight sessions, all session meals and class materials. Contact Gail Melgren, Program Coordinator, Greater Ozarks Leadership Development, 417-836-3701 or at gmelgren@missouristate.edu for information on scholarships and sponsorships. **Application is due August 31, 2008.**

B. Attendance

ATTENDANCE AT ALL SESSIONS IS REQUIRED!

You are expected to attend every session. However, you will be allowed to be absent from one session with prior approval and permission of the Program Coordinator. An absence is missing a whole session or any part thereof. If you miss more than the one approved absence you will need to make up the applicable session(s) the following year in order to graduate.

If selected, I am willing to attend all sessions/functions sponsored by Greater Ozarks Leadership Development and devote the necessary time to be a contributing member of the Greater Ozarks Leadership Development class. I understand that if I fail to meet these obligations, I may be asked to withdraw from the program and will not graduate with my class.

I have read and understand the attendance policy stated above.

Applicant Signature _____

I agree to pay Greater Ozarks Leadership Development the tuition for the above applicant, if accepted. I understand **tuition is due by September 15, 2008.**

Financial Sponsor Name _____

Signature/Title _____

I agree to allow my employee to devote the time necessary to be an active member of Greater Ozarks Leadership Development, if accepted.

Employer/Supervisor Name _____

Signature/Title _____

Mail your completed application to: Greater Ozarks Leadership Development
(*Application due by August 31, 2008*) Attn: Gail Melgren, Program Coordinator
Jim D. Morris Center for Continuing Education
Missouri State University
301 S. Jefferson
Springfield, MO 65806

Fax your completed application to: Gail Melgren
GOLD Program Coordinator
417-836-7674

If you have **questions** regarding this application or the GOLD program, please contact:
Gail Melgren
GOLD Program Coordinator
836-3701
gmelgren@missouristate.edu