

# LEADERSHIP SEMINOLE 2018 APPLICATION FORM

## I. PERSONAL DATA

Name (Last, First, Middle) \_\_\_\_\_

Home Address \_\_\_\_\_

Business Address \_\_\_\_\_

Tuition Paid by:  Business  Individual  Check enclosed  Credit Card

MC/Visa/AmEx/Disc. Credit Card # \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Name on Credit Card (please print) \_\_\_\_\_

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

Shirt Size: S \_\_\_\_\_ M \_\_\_\_\_ L \_\_\_\_\_ XL \_\_\_\_\_ XXL \_\_\_\_\_ 3XL \_\_\_\_\_ 4XL \_\_\_\_\_

Contact Phone \_\_\_\_\_ Business Phone \_\_\_\_\_

FAX \_\_\_\_\_ E-mail Address \_\_\_\_\_

Hobbies \_\_\_\_\_

## II. EDUCATION (Begin with high school, list college(s), advanced degrees and / or specialized training.)

| Name and location of School | Degree | Dates |
|-----------------------------|--------|-------|
|-----------------------------|--------|-------|

|       |  |  |
|-------|--|--|
| _____ |  |  |
| _____ |  |  |

## III. EMPLOYMENT

Present Employer \_\_\_\_\_

Type of Business \_\_\_\_\_

Job Title \_\_\_\_\_

***Please complete this form and mail, fax, or e-mail to:***

**Seminole Chamber of Commerce**

**Attn: Leadership Seminole**

**P.O. Box 1190**

**Seminole, OK 74868**

**405.382.3640**

**FAX 405.382.3529**

Briefly Describe Responsibilities: \_\_\_\_\_

\_\_\_\_\_

IV. BUSINESS / PROFESSIONAL AFFILIATIONS / COMMUNITY INVOLVEMENT

A. Organization \_\_\_\_\_

Describe Responsibilities: \_\_\_\_\_

\_\_\_\_\_

B. Organization \_\_\_\_\_

Describe Responsibilities: \_\_\_\_\_

\_\_\_\_\_

C. Organization \_\_\_\_\_

Describe Responsibilities: \_\_\_\_\_

\_\_\_\_\_

D. Organization \_\_\_\_\_

Describe Responsibilities: \_\_\_\_\_

\_\_\_\_\_

E. Organization \_\_\_\_\_

Describe Responsibilities: \_\_\_\_\_

\_\_\_\_\_

F. What do you consider your most important accomplishment in one of the above organizations? \_\_\_\_\_

Why? \_\_\_\_\_