



Application Information

Tuition: \$1500 per participant

Applicants will be invoiced for tuition upon their acceptance into the program. Tuition may be paid by the individual, employer, or other agency. Please do not send a check with your application.

Attendance/Participation Requirements

The program runs from late September through late May. The typical schedule calls for two sessions per month, with both half-day and full-day sessions planned. To graduate from Leadership Cambria County, **attendance at a minimum of 80% of the classroom sessions and full participation in a team community project is required.** Attendance reports will be sent to sponsors and participants.

Deadline for application

Applications must be postmarked by **Friday, August 20, 2010.**

Application Process

Please return the completed application to:

Leadership Cambria County Selection Committee
Greater Johnstown/Cambria County Chamber of Commerce
245 Market Street, Suite 100
Johnstown, PA 15901-2910

For further information or additional applications, please contact:

Debra Orner
Vice President
Chamber of Commerce
814/536-5107 or debra@johnstownchamber.com.

Community Involvement

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

	Organization	Position Held	Dates
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____

Briefly state any contributions or achievements in any of the above which you consider significant, and explain your role in these accomplishments: _____

How much time (estimate total hours) do you currently spend each month on community, civic, professional, or other organizations? _____

Professional and/or Personal Achievement

What do you consider your highest achievement, responsibility or skill to date?

References

Please list the names of two persons other than your sponsor who are knowledgeable about your leadership potential and/or community involvement and who may be contacted regarding your qualifications as a participant.

1. Name: _____ Phone: _____
Address: _____
Relationship: _____

2. Name: _____ Phone: _____
Address: _____
Relationship: _____

Candidate and Sponsor/Employer Agreement

I agree to the participant requirements of the John B. Gunter Community Leadership Initiative.

Candidate's Signature Date

I support our candidate's participation in the John B. Gunter Community Leadership Initiative.

Sponsor's Signature Date