

Contact Information (Please Print)

LAST NAME FIRST PREFERRED FIRST NAME MIDDLE

NAME OF EMPLOYER/ORGANIZATION

JOB TITLE

WORK ADDRESS CITY STATE ZIP

WORK PHONE WORK FAX WORK E-MAIL

HOME ADDRESS CITY STATE ZIP

HOME PHONE CELL PHONE HOME E-MAIL

**** *Communication will primarily be via email unless otherwise requested.*
PRIMARY EMAIL FOR LBA COMMUNICATION: _____

Have you previously applied to LBA? No Yes, when? _____

How did you receive information on Leadership Broken Arrow? (Check all that apply.)

Chamber of Commerce Employer Friend Brochure

LBA Alum Media Internet Other _____

Program Fees

Program fees include materials, breakfast*, lunch* and administrative costs. The program fee for LBA 2011 is \$450.00. **If your application is received prior to June 15, 2010, an early bird fee of \$375.00 will be charged. Applications received AFTER June 15, 2010, will be charged \$450.00 Applicant/business will be invoiced upon acceptance.** Payment is due by **August 24, 2010, (Tuition is non-refundable).** A limited number of scholarships are available. If you wish to apply for aid, state the amount needed and the reason for your request. For Business/Organizations that have two or more applicant's accepted, program fee is \$375.00 per person.

Program Fees will be paid: Personally By employer I would like to donate to LBA, please contact me.
 I would like to donate to LBA, please invoice me/my employer this amount _____
 I am requesting scholarship assistance. Amount requested \$ _____

Reason: _____
(This will be kept confidential)

*Any special Dietary requirements, please explain: _____

Employment / Professional Growth

Category of Employment:

- Banking Business/Industry Education Government Health Care Laborer
 Legal Media Public Safety Religion Social Services
 Retired Other _____

What do you feel is your highest leadership contribution to date in your business/professional career?

Indicate your involvement in professional or business associations.

NAME OF ORGANIZATION	DATES OF MEMBERSHIP	LEADERSHIP ROLE
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Education

Provide information about your education.

SCHOOL	CITY	FROM YR. TO YR.	DEGREE	MAJOR
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Cite extracurricular activities and special honors or awards for leadership activities:

Community Involvement / Leadership

Provide information about your community volunteer service. List your civic, social service, religious and/or other not-for-profit organizations in which you are or have been involved. (LBA will provide additional opportunities for involvement following program graduation.)

NAME OF ORGANIZATION	DATES OF MEMBERSHIP	LEADERSHIP ROLE
_____	_____	_____
_____	_____	_____
_____	_____	_____

Please describe a time when your community involvement had a positive impact

LBA Program Participation

Describe your motivation to participate in LBA and what you believe your future contribution to the community might be.

What one thing in Broken Arrow would you build on or change?

Describe one particular skill, knowledge, professional or technical expertise that could be helpful to LBA 2011.

LBA Program Participation cont'd.

Share one additional thing about yourself. If you are selected for LBA 2011, this information may be shared.

Applicant's Agreement

I hereby give LBA's selection committee permission to verify any of the above information. LBA is an equal opportunity program. Race, gender, creed, national origin and political affiliation have no bearing on class selection. **Applicant should reside or work in Broken Arrow**, profess an interest in social and civic issues, be willing to listen to a broad range of opinions and participate in a cordial exchange of ideas. All individuals with an interest in the Broken Arrow community are welcome to apply. Class size is limited

By signing this form you are giving consent for your name and/or picture to be released for LBA program promotion and community contact information. If you **do not want** your contact information published, **please check here**_____.

X
SIGNATURE OF APPLICANT

DATE

Please fax this form to: LBA 2011 at 918-251-1777

Or mail to:

**Chamber of Commerce
Leadership Broken Arrow
123 North Main Street, Broken Arrow OK 74012**

