



2025 Application

DEADLINE: October 31, 2024

PARTICIPANT TYPE Employer Sponsored Individual

CONTACT INFORMATION

Full Name _____

Preferred Name for Name Badge *(if different)* _____

Date of Birth _____ Age _____

Complete Home Address _____

Mobile Phone _____ Personal E-mail _____

Emergency Contact and Information _____

Personal Facebook, Twitter, LinkedIn, Instagram _____

How long have you lived in Shreveport/Bossier? _____

If Applicable:

Spouse's Name & Organization _____

Children's Names & Ages _____

Do you have any food allergies or diet restrictions? _____

EMPLOYMENT SECTION

Organization _____ Position/Title _____

Address _____

Office Phone _____ E-mail _____

Supervisor Information _____

HIGHER EDUCATION *(begin with highest level completed) -- University, Years Attended, Degree (include major/minor)*

CIVIC/COMMUNITY ACTIVITIES

List top two in order of importance to you: any civic, community, political, professional, religious, athletic or other activities with which you are currently or have recently been involved.

Indicate major roles in the organization.

Organization _____ Organization _____

Position/Assignment _____ Position/Assignment _____

Responsibilities _____ Responsibilities _____

COMMUNITY INTERESTS *(please select all that apply)*

Arts/Culture	Economy/Business	Education	Energy/Water	Environment/Climate Change
Government	Healthcare	Housing	International Affairs	Land Use
Social Services	Transportation	Workforce Development	Other _____	

RECOGNITIONS *(please list two in order of importance to you) -- Award/Honor, date received*

Email the following to
tracy@shreveportchamber.org

- Completed Application**
- Applicant Headshot**, jpg high resolution format preferred
- Current Resume**
- (2) Letters of Recommendation**

Questions, call 318.677.2547

PLEASE ANSWER THE FOLLOWING QUESTIONS IN THREE TO FOUR SENTENCES

Describe how you demonstrated leadership in one of your Civic/Community Activities?

What do you consider your greatest career achievement to date?

What do you consider your most important contribution to the community?

In your opinion, what are the most pressing problems facing the Shreveport/Bossier area today?

What would you propose in order to address one of these problems?

How did you become aware of the Greater Shreveport Leadership Program?

How do you hope to benefit from being a participant?

What will you contribute to the Program as one of its participants?

DEMOGRAPHICS For statistical purposes only; has no bearing on candidacy for admission

GENDER Female Male

ETHNICITY African American American Indian Anglo Asian American Hispanic/Latino
Other (please specify): _____ U.S. Citizen? (please circle one) **YES No**

MARITAL STATUS Single Married Divorced/Widowed

RECOMMENDED BY

Name _____ Organization _____
Position _____ Phone _____

PLEASE NOTE THE FOLLOWING:

TIME COMMITMENT In order to accomplish the Greater Shreveport Leadership Program's objectives, the full participation of each individual is essential. The Greater Shreveport Leadership Program commences in February with an orientation reception and **mandatory** two-day Opening Retreat and ends in November with a graduation ceremony. Participants meet once each month for (7) one-day sessions, along with a **mandatory**, two-day visit to the Legislature in Baton Rouge. Participants are also required to work with their class on a Community Service Project (additional time commitments will be required in order to fulfill the Community Service Project, and will depend on the scope of the project developed by the team).

By signing below, you indicate that you are fully aware of the time commitment that will be required as a participant, that the attendance at the opening retreat as well as the Baton Rouge session are **mandatory** and that if you miss more than **two** of the remaining sessions for whatever reason, you will be automatically dropped from the program with no portion of the tuition refunded. **Tuition and Sponsorships are non-refundable and non-transferable.**

TUITION

If accepted into the Greater Shreveport Leadership Program, you and/or your employer will be invoiced for a tuition fee; \$1,800 for member organizations and \$2,300 for non-members. A \$50 application fee will also be assessed and is due upon submission of this application. Tuition fees are due February 7, 2025.

By signing below, you indicate that you understand and agree to adhere to the required financial commitment for the Greater Shreveport Leadership Program.

Will your employer be responsible for your tuition? Yes No
Will a sponsor be responsible for your tuition? Yes No
Do you need to be considered for scholarship for the program? Yes No

If yes, please explain: _____

If sponsored, both signatures are required. If you alone, are responsible for your tuition, only you are required to sign.

By signing below, you acknowledge that the applicant's/your tuition will be paid by **February 7th, 2025** and that the signed parties below are responsible for payment to the Greater Shreveport Chamber of Commerce.

Applicant's Signature:	Date:
Employer's Name (please type/print):	Employer's Title:
Sponsor/Company Name:	
Sponsor/Employer's Signature:	Date:

EMPLOYER CONSENT

Participants of the Greater Shreveport Leadership Program must have the support of their employer. **The employer must sign this form to indicate their support.**

This application has the approval of this organization and the applicant has our full support, which includes the time necessary to fulfill the program requirements and the financial commitment listed above.

Employer's Name (please type/print):	Employer's Title:
Sponsor/Company Name:	
Sponsor/Employer's Signature:	Date:

APPLICANT ACKNOWLEDGMENT OF COMMITMENTS

Please read the following, initialing to signify understanding and compliance, and sign below.

___ Full participation at the two-day Opening Retreat is mandatory, no exceptions. **Retreat Date: February 11-12, 2025**

___ Full participation at the one-day, Legislative session is mandatory, no exceptions. **Date: May 6, 2025**

___ Class members must participate in all of the scheduled Sessions held from March to October. **No class member may miss more than two sessions.**

___ Class members must be involved and engaged with their selected team Community Service Project. Additional time commitments will be required in order to fulfill the Community Service Project and will depend on the scope of the project developed by the team.

___ Tuition/Sponsorship is non-refundable and non-transferable and must be paid by **Friday, February 7th, 2025** The signed parties above, are responsible for payment to the Greater Shreveport Chamber of Commerce.

I understand the goals and commitment of the Greater Shreveport Leadership Program year and the attendance requirements. If selected, I will fulfill all obligations outlined in this application and will see to payment of my tuition upon acceptance. I acknowledge that I have completed the application and that all the information contained herein is true and correct. I hereby give the Greater Shreveport Chamber of Commerce the right to make inquiries regarding the information provided on this application form.

Applicant's Signature:	Date:
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Participants DL#: _____ State Issued: _____