



## LEADERSHIP LONGVIEW APPLICATION CLASS 25

### **Our Mission**

To strengthen and transform the community of Longview through a program of leadership development, community study and involvement.

### **Why Leadership Longview?**

Leadership Longview Class 25 is designed to incorporate key leadership objectives for community leadership including a wide community base leadership development and community trusteeship. Participants will be given the tools necessary to question standard practices, encourage new visions, empower others to act and make a difference in their community.

### **Application Instructions**

Provide all the information requested in this application, relevant to your own experience and background. Please do not attach resumes in lieu of this application. They will not be reviewed. Your application must be signed by you and your employer and received no later than 5:00 p.m. on **July 27<sup>th</sup>**. Candidates will not be considered unless a complete application with the required signatures is included.

### **Selection**

Leadership Longview Class 25 will be selected through a selection process by members of the Leadership Longview Committee. Applicants will be notified of the committee's decision the second week of August. Selection will be made on the following criteria: Commitments to civic involvement and to the Longview community; potential for community leadership and professional, as well as personal achievement. Applications must be answered completely to warrant consideration.

### **Tuition**

Tuition for each participation in Leadership Longview is \$695.00 for Longview Partnership members and \$795 for nonmembers. Tuition is payable upon notification of acceptance. Leadership Longview has a very limited amount of financial assistance available. Those requesting assistance must complete the Financial Assistance Form and enclose it with your LL application. Completed applications and/tuition assistance requests are due on or before 5:00 p.m. on **July 27<sup>th</sup>**.

### **Please deliver or mail to**

Leadership Longview  
410 N. Center  
Longview, Texas 75601

### **For more information contact:**

Mary Whitton at 903-237-4000 or [mary@longviewpartnership.org](mailto:mary@longviewpartnership.org)



**Leadership Longview is a program sponsored by the Longview Partnership Chamber of Commerce and was formed in 1981 to identify potential community leaders, educate them to acquire an understanding of the critical issues affecting our region and provide opportunities for leadership and stewardship in the Longview area.**

### **LEADERSHIP LONGVIEW CLASS 25 PROGRAM DAYS**

**Fall Retreat**

**Friday & Saturday, September 14-15, 2007**

**(Mandatory)**

**Community and Economic Development**

**TBA**

**Tour Day**

**Thursday, November 8, 2007**

**Health and Social Services**

**Thursday, December 13, 2007**

**Education**

**Thursday, January 10, 2008**

**Criminal Justice**

**Thursday, February 14, 2008**

**Quality of Life**

**Thursday, March 13, 2008**

**Day of Challenge Community Service Project**

**Thursday, April 10, 2008**

**(Mandatory)**

**Graduation**

**Tuesday, May 6, 2008**

**Hours of each program day are from 8:00 a.m. – 5:00 p.m.**



## Class 25 Application

Please attach a wallet size or passport size headshot photo\*  
(or you may send a digital photography via email to [mary@longviewpartnership.org](mailto:mary@longviewpartnership.org))

### Personal Information (please print)

\_\_\_\_\_  
First Name

\_\_\_\_\_  
M.I.

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
Preferred First Name

\_\_\_\_\_  
Date of Birth

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

\_\_\_\_\_  
City, State, ZIP

Home phone \_\_\_\_\_

Years you have lived in Longview area \_\_\_\_\_

\_\_\_\_\_  
Name of Company/Organization

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

\_\_\_\_\_  
City, State, ZIP

\_\_\_\_\_  
Title or Position

Business phone \_\_\_\_\_

Work Email address \_\_\_\_\_

Preferred mailing address  Home

Business

### Letters of Recommendation

Attach two letters of recommendation. Letters may be addressed to the attention of the Selection Committee

**PLEASE ANSWER THE FOLLOWING QUESTIONS:**

- 1. Describe your primary occupation and duties, if applicable.**

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- 2. Describe your volunteer, civic, community and church-related activities during the past five years, noting any special wards and citations. Include specific examples of your leadership experience.**

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- 3. List and briefly describe any other accomplishments, skills and awards that you consider significant, including educational benchmarks.**

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- 4. What have you accomplished in these activities and which do you consider important?**

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- 5. Please identify a particular issue, opportunity or problem you feel is crucial to the Longview area.**

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**6. Why do you want to participate in Leadership Longview? What do you hope to gain from participation and what do you think you would give to the community as a past participant?**

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## Leadership Longview Class 25 Commitments for Participation



*This form must be filled out completely and attached to the application to warrant consideration in the program.*

### **Financial Commitment**

Tuition for each participant in Leadership Longview is \$695 for Longview Partnership members and \$795 for nonmembers. Financial assistance is limited. For information on financial assistance, please refer to the Financial Assistance Form included in this packet.

Employer Tuition Portion	\$ _____
Applicant Tuition Portion	\$ _____
Tuition Assistance Requested	\$ _____
Total Tuition:	<b>\$695 (LP members) \$795 (nonmembers)</b>

Tuition is due prior to the beginning of the program year.

\_\_\_\_\_ I would like to be considered to make two payments of tuition due August 2007 and December 2007.

### **Time Commitment**

Full participation by each member of Leadership Longview is critical. This includes attendance at:

- (1) Opening Retreat – Friday, September 14 and Saturday September 15 (all day both days) – **(attendance mandatory – no exceptions)**
- (2) Community Service Project Day – Thursday, April 10 (all day) **(attendance mandatory – no exceptions)**
- (3) Monthly Class Days – Second Thursday of every month (October-April) from 8:00 a.m. – 5:00 p.m. Each participant can miss only **ONE** Class day due to illness or unavoidable conflict. **This policy will be strictly enforced.**

It is vital that you and your employer understand and honor these commitments. *If you are unable to commit to this schedule, please do not apply at this time.* Applications without your employer's signature will not be accepted.

I, as an applicant, understand and agree to these commitments.

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Applicants Signature

Date

I, as the above candidate's employer, understand and agree to these commitments.

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Employer Signature\*

Date

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Employer Printed Name\*

Title

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Employer Work Phone\*

**\*Not applicable to self-employed or those not employed**

# Financial Assistance Form

The policy of Leadership Longview is to provide a limited amount of tuition assistance to those candidates who are accepted into the program and demonstrate financial hardship that will prevent their participation. Award amounts are based on the number of requests received and the amount of funds available each year. Assistance will only be granted for ½ of the tuition costs.

Consideration for tuition is based primarily on demonstrated need.

Applicant \_\_\_\_\_ Phone \_\_\_\_\_

Employer \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Please provide your reasoning for your tuition assistance request.

*Applications for assistance are confidential and have no bearing on selection.*

I confirm that the above information is a true account of my situation

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date