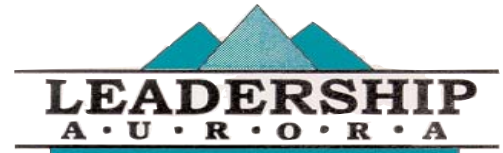


CONFIDENTIAL APPLICATION

(Please Type or Print Clearly)



MISSION STATEMENT

LEADERSHIP AURORA EDUCATES AND PREPARES COMMUNITY LEADERS WHO ARE COMMITTED TO SHAPING AURORA'S FUTURE

The purpose of Leadership Aurora is reflected in its goals:

- To develop awareness of the Aurora area - its strengths, challenges and opportunities
- To enhance leadership abilities
- To create a network of informed, concerned leaders
- To encourage greater involvement in the community

PERSONAL DATA

Name _____
Last First M.I.

Business Name _____

Business Address _____

City _____ State _____ Zip _____

Business Phone _____ Fax _____ Email _____

Name of President or CEO _____

Current Position _____ How long with company _____

Your Home Address _____

City/State/Zip _____ Home Phone _____

Sponsoring Organization _____
(if different from business)

Address _____

City _____ State _____ Zip _____

Phone _____ Name of President or CEO _____

EDUCATION & EXPERIENCE

State your educational and professional background including degrees awarded, field(s) of study, professional experience, institutes, training programs, etc. (You may attach a resume or separate sheet to answer this question.)

TUITION

Tuition for the Leadership Aurora program is \$850 per participant. Tuition covers all program costs, meals and materials. A limited number of partial scholarships is available to those not otherwise able to pay the full tuition. Scholarships are awarded based on need and class composition. **Tuition is due in full by September 1st unless prior arrangements have been made.**

_____ Full tuition of \$850 can be paid

_____ I request scholarship assistance (please explain how much is needed, why and specific \$ amount)

_____ If a scholarship is requested, what portion of tuition can you pay? _____

REFERENCES

List two persons who have knowledge of your qualifications to be a Leadership Aurora participant.

1. _____
Full Name & Title Phone
Business or Home Address (please include city and zip)

2. _____
Full Name & Title Phone
Business or Home Address (please include city and zip)

EMPLOYER AUTHORIZATION

Full support from the applicant's employer is necessary to be able to effectively participate in Leadership Aurora. I have approved the submission of this application and the time and any financial commitment on our part required for applicant to participate in Leadership Aurora, and I have read and understood the Cancellation & Refund Policy stated below.

Employer Signature

Date

CANCELLATION & REFUND POLICY

1. Cancellation must be made in writing and received by the Leadership Aurora Administrator by 5:00p.m. on the dates specified below.
2. Cancellation on or before September 1 will be given a full refund of any tuition paid.
3. Cancellation after September 1 but two days prior to the class retreat will be given a 50% refund of the full tuition amount minus any scholarship money provided to the candidate.
4. Cancellations any later than the above will be given no refund. Any candidate who misses the class retreat will be dropped from the class and will still be responsible for the full tuition amount minus any scholarship money with no refund.
5. Even though circumstances do arise, any participant missing more than two sessions may not graduate with the class, and no portion of tuition will be refunded.



GOALS

Please identify and discuss a particular issue, opportunity, or problem you feel is crucial to the Aurora area. (Be prepared to possibly discuss during your oral interview) (use other side of paper if necessary)

How would you expect to use your Leadership Aurora experience?

What can you contribute to the program?



COMMUNITY INVOLVEMENT

Please list the civic activities that you have participated in during the last five years. For each activity, indicate the nature of your participation. If you have not been involved in any civic activities, please explain why.

Organization/Activity	Involvement
_____	_____
_____	_____
_____	_____



COMMITMENT

In order to accomplish Leadership Aurora's objectives, the full commitment and participation of each individual selected is necessary. Participants are expected to attend all sessions including:

- 1) Two-Night Opening Retreat - scheduled mid to late September (mandatory attendance).
- 2) One full weekday each month on the third Thursday from October to May.
- 3) Graduation Program - 1/2 day session plus luncheon in early June.
- 4) Community experiences required independent of class sessions.

If selected, I am fully prepared to be an active participant and devote the time and energy required to complete the Leadership Aurora program. I have read and understood the Cancellation & Refund Policy stated below.

Applicant Signature

Date



APPLICATION DEADLINE

Application must be received at the Aurora Chamber of Commerce by July 15. All applicants must participate in a personal interview with the Selection Committee. **NOTE: DO NOT SEND TUITION WITH APPLICATION.**

AURORA CHAMBER OF COMMERCE * 562 Sable Blvd #200 * Aurora, CO. 80011 * Phone 303-344-1500
Fax 303-344-1564 * Email: info@aurorachamber.org * website: <http://www.aurorachamber.org>