



*An opportunity to improve
your skills and your community*

CONFIDENTIAL APPLICATION FOR APPOINTMENT

INSTRUCTIONS

Type or print in blue or black ink. Complete each section fully. Failure to complete application in full and submit by the deadline may result in forfeiture of inclusion in the selection process. Application must be signed by the applicant and employer, if applicable. Keep this page for your records; return **ONLY** completed application (attached).

SELECTION CRITERIA

Participation in LEADERSHIP COSHOCTON COUNTY is open to persons residing or working in Coshocton County. Candidates should have:

- ◆ a demonstrated commitment to the community
- ◆ an interest in assuming greater responsibility
- ◆ the intention to remain employed or a resident in the county
- ◆ the full support of employer (if applicable)
- ◆ the ability to attend all sessions (please check website for current program dates)

The number of participants in LEADERSHIP COSHOCTON COUNTY is limited. Please check the website for tuition information and current program dates. Candidates may apply personally or be nominated by employers or other interested persons.

A conscious effort is made to select a diverse group that represents Coshocton County. Due to size constraints, it is inevitable that qualified candidates may not be selected. Applicants not selected are encouraged to re-apply for Leadership Coshocton County. Likewise, nominators are encouraged to re-submit names for consideration.

Attendance at **both** Opening Retreat including an overnight stay **and** Closing Retreat is **mandatory**. Please check the website for current program dates. While emergencies arise, any participant missing more than one regular session will be required to complete an alternate activity or attend the day missed within one year before being recognized as a graduate of LEADERSHIP COSHOCTON COUNTY.

LEADERSHIP COSHOCTON COUNTY Application Deadline: June 1

Date: _____

Name: _____

Home Address: _____

Home Phone: _____ Cell Phone: _____

Home email: _____ Prior Applicant? Yes (Year _____) No

Employer: _____ Position: _____

Business Address: _____

Business Phone: _____ Business E-mail: _____

Preferred Mailing Address: (circle one) Work Home Preferred Email: Work Home

Length of employment with current employer: _____ years

If less than one year:

Previous employer: _____

Position: _____ Length of Employment: _____ years

Describe your work responsibilities: _____

What do you consider to be your highest career achievement to date?

Organization/Professional Affiliations or Service Clubs (Kiwanis, Rotary, etc.)

Board Service or other volunteer experience; please give organization name and dates of service

Why are you interested in participating in Leadership Coshocton County?

What do you hope to gain from this experience? _____

Continued on back

Which of the following categories best describe your present area of leadership activity or interest?

Human Service Government Labor Religion Business/Industry
Media Education Medical Law Volunteerism
Civic Organizations Art Other (specify): _____

What do you believe are the three most pressing problems facing Coshocton County?

1. _____
2. _____
3. _____

What do you believe are the three greatest opportunities in Coshocton County?

1. _____
2. _____
3. _____

References: Please list two people who are familiar with your leadership performance and potential and could attest to your commitment to this program:

Name: _____ Name _____
Email: _____ Email: _____

Nominator: (If same as the candidate, write "SAME" on the name line.)

Name: _____
Address: _____
Email: _____ Cell phone: _____

Comments about the candidate:

The success of Leadership Coshocton County is dependent upon each participant's commitment to attend monthly sessions. No more than one absence is permitted in order to graduate from the program. I will be able to honor this significant time commitment. I will receive support from my employer and my family. Tuition payment must be received in full prior to the Reception in August. Upon acceptance an invoice for tuition will be provided.

Signature of Applicant Date

Signature of Employer (if applicable) Date

Please return to: **Leadership Coshocton County • 220 S. Fourth St. • P.O. Box 55 • Coshocton, OH 43812**
Email: lead@coshoctonfoundation.org **Or Fax to: 740-622-1660, attn.: Leadership**