



April 30, 2009

Leadership Crawford County is designed to develop effective leaders by enhancing their civic, social, and professional skills to have an immediate and long-lasting positive impact on our community. Leadership Crawford County has been modeled after many successful leadership programs from throughout the country and has been tailored to specifically meet the needs and challenges faced by Crawford County.

Whether your goal is personal or business related, Leadership Crawford County presents an opportunity to enhance your leadership abilities as well as to learn the inner workings of Crawford County. Participants will devote time over the nine month course to Leadership Crawford County, exploring and gaining insight into:

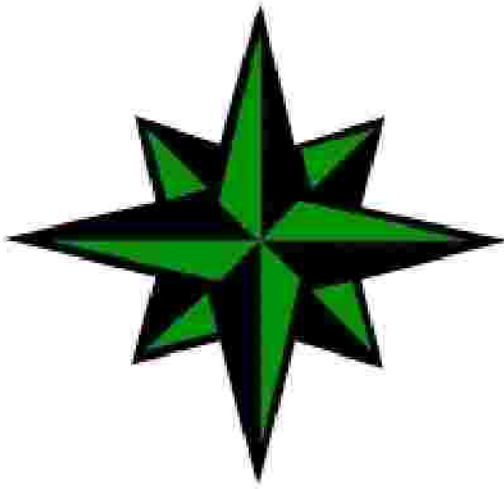
- Various Leadership Styles
- Team building
- Self assessment
- Community Issues
 - Local & State Government
 - Social services
 - Healthcare
 - Education
 - Business and Industry
 - Agriculture
 - Arts
 - Media

Participants are required to complete a community service project that will have an immediate impact on Crawford County.

Apply to become part of **Leadership Crawford County Class VI** by completing the attached application and returning it to Leadership Crawford County, 301 S. Cross-Suite 203, Robinson, IL 62454, along with the \$100 application fee by July 31, 2009. Candidates who are selected will be notified no later than August 15. Remaining tuition of \$395 will be due by August 31. For additional information, please call Shelly Fuller at 544-8686 or Connie Calvert at 546-1412.

We look forward to your participation in Leadership Crawford County!

Leadership Crawford County, Board of Directors



**LEADERSHIP
CRAWFORD
COUNTY**

Application - Due July 31, 2009

Leadership Crawford County
C/O Crawford County Development Association
301 South Cross - Suite 203
Robinson, IL 62454
Phone: (618) 546-1412

Please type or print in black ink.

PERSONAL INFORMATION

Name _____.

Job title or responsibility _____.

Employer _____.

* () Work Address _____.

Street/Box

Phone _____.

City

State

Zip

* () Home Address _____.

Street/Box

Phone _____.

City

State

Zip

*Please check preferred mailing address in the space () above.

Date of Birth _____ E-Mail _____ Fax _____.

Length of Residence in Crawford County _____.

Do you anticipate being a resident of Crawford County in: () 0-2 years () 3-5 years () 6+ years

REFERENCES (with knowledge of your leadership potential)

Names and addresses of three references you have contacted to complete the reference forms.
Attached reference forms should be sent directly to the Leadership Crawford County office.

Name _____ Business _____.

Address _____ Phone _____.
Street City State Zip

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Street City State Zip

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Street City State Zip

Enclose with this application a resume or a statement of organizations, employment and education history.

LEADERSHIP CRAWFORD COUNTY COMMITMENT STATEMENT

NAME: _____

If selected as a participant in Leadership Crawford County, I am willing to attend all the functions sponsored by the program.

Attendance is required to become a graduate of Leadership Crawford County. This involves a two-day mandatory retreat, eight all-day monthly programs, completion of a community project, and commencement exercises. The class day/trip to Springfield on Government day will be mandatory and participants will also be required to go on a 'ride-along' with a county or city patrolman. To be considered for selection, I agree to commit myself to this amount of time. My signature below attests to this commitment. I will notify Leadership Crawford County in extreme situations for excused absences. If I miss **more than two** Class Meetings for any reason, I will not be eligible for graduation. In extenuating circumstances and upon review by the Leadership Crawford County Board of Directors, I may be allowed to make up missed class days during future classes, at my expense, and be eligible to graduate at that time.

The tuition is \$495. I have enclosed payment of \$100 with the application and into Leadership Crawford County, I, my employer, or my sponsor. If no payment is provided, I will be billed for the remaining balance of the tuition fee (\$395). The application fee will be refunded **only** if the applicant is not accepted by Leadership Crawford County.

Please check one: Upon selection to participate in Leadership Crawford County,

- Bill my employer/sponsoring organization
- Bill me personally
- Scholarship requested (application forwarded on request)

Signature of Applicant

Check List:

- \$100 application fee
- original application
- five photocopies of completed application form
- 3 recommendation letters given to referrals
- resume or statement of organizations, employment, and education

Send to: Leadership Crawford County
C/O Crawford County Development Association
301 South Cross - Suite 203
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For additional information, call Leadership Crawford County at (618) 546-1412.

Organization Commitment

(To be completed by the employer of an applicant for Leadership Crawford County)

The applicant should be a person who has demonstrated leadership ability, community influence and civic involvement.

Attendance at functions is crucial to the participant's success in Leadership Crawford County. If your applicant is unable to commit to this schedule, it may not be in his/her best interest to apply at this time.

The Orientation Retreat, Government Day in Springfield and Graduation Ceremony are requirements for successful completion of Leadership Crawford County. Class members will also be required to complete a 'ride-along' with any of the City or County patrolmen. Participants who miss more than two Class Meetings for any reason will not be eligible for graduation. In extenuating circumstances and upon review by the Leadership Crawford County Board of Directors, participants may be allowed to make up missed class days during future classes, at the expense of the participant, and be eligible to graduate at that time.

No portion of the tuition is refundable.

Orientation Retreat:

Overnight, out-of-town - September 20th & 21st, 2009

Class Meetings:

One full day meeting each month (October 2009 – May 2010)

Class days will be 2nd Wednesday, February date for Springfield subject to change

Graduation Ceremony:

Evening event, May 2010

I hereby agree to support the involvement of _____ in Leadership Crawford County 2009/2010 and agree that he/she will be able to fully participate in all program activities and will be allowed the time required to participate in the program.

Signed: _____

Organization: _____

Title: _____ Phone: _____

Please complete this form and return by July 31, 2009 to:

Leadership Crawford County
301 South Cross – Suite 203
Robinson, IL 62454
(618) 546-1412

RECOMMENDATION LETTER

Applicant's Name: _____

The person above has applied to participate in Leadership Crawford County. The most important factor in selection is identifying those individuals most apt to utilize their leadership skills for the long-term benefit of the community. Basic criteria for achieving this selection are as follows:

1. A sincere commitment, motivation, and interest to serve the community.
2. Interest in seeking volunteer, public office, board, or commission leadership roles in the community.
3. Opportunities for advancement of leadership positions within their own organization which may play a significant role in the Crawford County community.
4. A diversified representation of class members from the community including business, labor, education, the arts, religion, government, community-based organizations, and ethnic and minority groups.
5. Demonstrated leadership indicated by involvement in past community activities.
6. An ability to make the time commitment required by the program.

Waiver of Access: The Family Educational Rights and Privacy Act of 1974 permits the individual requesting this reference to sign a waiver relinquishing the right to inspect letters of recommendation. The person's signature below constitutes such a waiver. The lack of a signature implies that the person for whom this reference is being written still have the right to read this reference in the Leadership Crawford County office.

_____ **I DO NOT** choose to waive access to recommendations submitted by the reference below.

_____ **I CHOOSE TO WAIVE** access to recommendations submitted by the reference below.

APPLICANT SIGNATURE:

DATE:

In what capacity have you known the applicant? _____

How long have you known the applicant? _____

I: ___ Highly Recommend ___ Recommend ___ Recommend w/reservations ___ Do not recommend

May we contact you regarding the applicant? _____ YES _____ NO

Name (please print)

Title

Business

Street

City

State

Zip

Phone

Signature

Date

Applicant's Name: _____

Please check the appropriate box regarding the potential of the candidate

Communication Skills

	Exceptional	Above Average	Average	Potential for improvement	No basis to judge
Written skills					
Verbal skills					
Listening skills					
Assertiveness with thoughts and ideas					

Leadership Potential

Exhibits an interest in community issues					
Potential for effective group leadership					
Appears confident in group settings					
Is an effective role model to others					

Administrative Skills/Sense of Responsibility

Adaptable to change					
Ability to prioritize tasks					
Completes tasks on time					
Works well under pressure					
Pays attention to detail					
Exhibits internal motivation					

Sensitivity and Appreciation of Diversity

Exhibits an open mind					
Demonstrates concern for others needs					
Appears to be non-judgmental					
Respects other's life choices					
Relates well with persons of different religion, culture, sexual orientation and intellectual competence					

Please make any additional comments on back:

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