

**PARTICIPANT TYPE**  Employer Sponsored  Individual

**DEADLINE: OCTOBER 22, 2018**

**CONTACT INFORMATION**

Applicant Name and Preferred Name *(if different)* \_\_\_\_\_  
 Complete Home Address \_\_\_\_\_  
 \_\_\_\_\_  
 Mobile Phone \_\_\_\_\_ Personal E-mail \_\_\_\_\_  
 Emergency Contact and Information \_\_\_\_\_  
 Personal Facebook, Twitter, LinkedIn, Instagram \_\_\_\_\_  
 T-Shirt Size \_\_\_\_\_ How long have you lived in South Florida? \_\_\_\_\_

**Applicant Headshot**  
**Your photo will be used in the class yearbook. Please email your headshot once online application is completed to: Laura Flores**  
[lflores@miamichamber.com](mailto:lflores@miamichamber.com)  
**Minimum resolution: 300 dpi, JPEG format**

**EMPLOYMENT SECTION**

Organization \_\_\_\_\_  
 Office Address \_\_\_\_\_  
 Office Phone \_\_\_\_\_ Fax \_\_\_\_\_ E-mail \_\_\_\_\_  
 Position/Title \_\_\_\_\_ Dates Employed \_\_\_\_\_  
 Supervisor Information \_\_\_\_\_

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

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**CIVIC/COMMUNITY ACTIVITIES** *(list top three in order of importance to you, any civic, community, political, professional, religious or other organization in which you are currently or have recently been involved)*

Organization, position held, dates active, phone and website  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**COMMUNITY INTERESTS** *(please select all that apply)*

- |  |   |  |  |   |
|--|---|--|--|---|
| <input type="checkbox"/> Arts/Culture    | <input type="checkbox"/> Economy/Business | <input type="checkbox"/> Education             | <input type="checkbox"/> Energy/Water          | <input type="checkbox"/> Environment/Climate Change |
| <input type="checkbox"/> Government      | <input type="checkbox"/> Healthcare       | <input type="checkbox"/> Housing               | <input type="checkbox"/> International Affairs | <input type="checkbox"/> Land Use                   |
| <input type="checkbox"/> Social Services | <input type="checkbox"/> Transportation   | <input type="checkbox"/> Workforce Development | <input type="checkbox"/> Other _____           |   |

**LANGUAGE FLUENCY** *Other than English:* \_\_\_\_\_

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

\_\_\_\_\_  
 \_\_\_\_\_

**RECOMMENDED BY**

Name \_\_\_\_\_ Position \_\_\_\_\_  
 Organization \_\_\_\_\_ Phone \_\_\_\_\_

**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?

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

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In your opinion, what are the most pressing problems facing Miami-Dade County today?

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

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How do you hope to benefit from being a participant?

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What will you contribute to the Leadership Miami® program as one of its participants?

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How did you become aware of Leadership Miami®?

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**DEMOGRAPHICS** *For statistical purposes only. Has no bearing on candidacy for admission into Leadership Miami® program.*

**GENDER**     Female             Male

**ETHNICITY**     African American     American Indian             Anglo             Asian American             Hispanic American  
 Other (please specify): \_\_\_\_\_

**MARITAL STATUS**     Single             Married             Divorced/Widowed

**PLEASE NOTE THE FOLLOWING**

**TIME COMMITMENT** In order to accomplish Leadership Miami®'s objectives, the full participation of each individual is essential. Participants are required to attend at least 80 percent of all scheduled Focus Sessions in order to graduate. This program will require your attendance at the two-day Opening Conference (all day Friday and Saturday), at six Focus Sessions (one Saturday per month), Graduation, completion of Fieldwork Assignments, and participation with your team in 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, you indicate that you are fully aware of the time commitment that will be required as a participant in the Leadership Miami® program and will abide by those requirements and fully participate in the program to the best of your abilities. **Tuition and Sponsorships are nonrefundable and nontransferable.**

**FINANCIAL COMMITMENT** Leadership Miami® participation is limited to employer sponsored participants and/or individual participants. Fees are due within 30 days of confirmation. By signing, you indicate that you understand and agree to adhere to the required financial commitment for Leadership Miami®.

**TUITION**

If accepted into the Leadership Miami® Class XL you and/or your employer will be invoiced for a tuition fee of \$2,550.00. In order to hold your seat in the class, you and/or your employer must submit payment no later than 5:00 p.m., Monday, September 24, 2018. Please make checks payable to the Greater Miami Chamber of Commerce.

- Will your employer be responsible for your tuition?                     Yes                     No
- Will a sponsor be responsible for your tuition?                     Yes                     No

If yes, 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 **Monday, September 24, 2018**, and that the signed parties below are responsible for payment to the Greater Miami 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**

Nominees for Leadership Miami® Class XL must have the support of their employer. **The employer must sign this form to indicate their support of the nominee's participation in the program.**

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 two-day Opening Conference is mandatory, no exceptions. November 2<sup>nd</sup> – 3<sup>rd</sup>, 2018.**

Class members must participate at least 80% of all scheduled Focus Sessions (one Saturday per month) from December to May. **No class member may miss more than two Focus Sessions and still be able to graduate.**

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. **No class member may graduate if not supporting selected team Community Service Project.**

Class members must complete Fieldwork Assignment, attend Chamber's annual conference and graduation.

Throughout the Leadership Miami® program year, photographs will be taken to document the class. Participants must consent to the use of these photographs in any literature or videos involved with the Greater Miami Chamber of Commerce for the purposes of marketing the organization.

Tuition/Sponsorship is nonrefundable and nontransferable and must be paid by **Monday, September 24, 2018**. The signed parties above, are responsible for payment to the Greater Miami Chamber of Commerce.

*I understand the goals and commitment of the Leadership Miami® 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 Miami Chamber of Commerce the right to make inquiries regarding the information provided on this application form.*

Applicant's Signature:	Date:
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