



# Elko Area Leadership Institute

2011 CONFIDENTIAL APPLICATION FORM (please print or type)

**Failure to complete any portion of this application will negatively impact the applicant's chances of acceptance.**

## Biographical Information

Name: Last:	First:	Middle:	Nickname:	
Address:		City:	State:	Zip:
E-mail Address:				
Home Phone:		Office Phone:		Cell Phone:
Length of residence in the Elko area (applicants must live or be employed in Elko County):				
Highest Degree Earned: <input type="checkbox"/> High School <input type="checkbox"/> Associate's <input type="checkbox"/> Bachelor's <input type="checkbox"/> Master's <input type="checkbox"/> Doctorate				
Other Certificates or Professional Development:				
Short Biography:				

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### Employment Information

<b>Present Employer:</b>	<b>Date started:</b>
<b>Type of business/organization:</b>	
<b>Title and responsibilities:</b>	

<b>Previous Employer:</b>	<b>Date started:</b>	<b>Date left:</b>
<b>Type of business/organization:</b>	<b>Reason for leaving:</b>	
<b>Title and responsibilities:</b>		

<b>Previous Employer:</b>	<b>Date started:</b>	<b>Date left:</b>
<b>Type of business/organization:</b>	<b>Reason for leaving:</b>	
<b>Title and responsibilities:</b>		

<b>Previous Employer:</b>	<b>Date started:</b>	<b>Date left:</b>
<b>Type of business/organization:</b>	<b>Reason for leaving:</b>	
<b>Title and responsibilities:</b>		

### Volunteerism

Volunteerism is an important component of leadership. List the associations/organizations for which you volunteer at this time and describe your responsibilities. If you have not been involved in any community activities, please explain why.

<b>Organization:</b>	<b>Volunteer Position:</b>
<b>Length of service:</b>	
<b>Responsibilities:</b>	
<b>Organization:</b>	<b>Volunteer Position:</b>
<b>Length of service:</b>	
<b>Responsibilities:</b>	
<b>Organization:</b>	<b>Volunteer Position:</b>
<b>Length of service:</b>	
<b>Responsibilities:</b>	

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## Additional Questions

A. Please explain your particular interest in the Elko area and how your involvement in EALI can benefit you and the Elko community. What would you like to gain from the program?

B. How will other members in your EALI Class benefit from your participation in EALI?

C. Please describe two opportunities or challenges facing the Elko area. How would you contribute to a satisfactory resolution?

D. With what types of community boards, committees, or groups would you like to be involved? Give examples.

E. In what role(s) do you see yourself five years from now?

F. How will EALI be able to help you accomplish your goals described in questions D and E above?



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How did you hear about EALI?
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### References

Please list three people, other than your employer or family, who are knowledgeable about your performance and leadership potential, and who may be contacted regarding your qualifications as an EALI applicant.

Name:	Title:
Business:	E-mail:
Address:	Phone:

Name:	Title:
Business:	E-mail:
Address:	Phone:

Name:	Title:
Business:	E-mail:
Address:	Phone:

### Tuition

Tuition for EALI is \$975 for Chamber members and \$1175 for non-members. Tuition covers all program costs including materials, overnight accommodations, meals and graduation. **Applicants are responsible for no less than \$175 of the tuition.** The remaining tuition may be paid by you and/or your employer. Up to \$500 in Tuition assistance may be available. Tuition assistance forms can be picked up at the Elko Area Chamber of Commerce. The EALI Administrative Committee will make all decisions on tuition assistance. Businesses with 10 or fewer employees may be eligible for payment options\*.

**Deadline:** Application must be submitted with a \$175 deposit and received at the Elko Area Chamber of Commerce, 1405 Idaho Street, Elko, NV 89801, **no later than 4:30 p.m., June 15, 2011.** If you are accepted into the EALI Class of 2012 and decline to participate, your deposit will be returned less a \$50 processing fee. Unsuccessful applicants will have 100% of their deposit refunded by July 22, 2011.

**Payment and Refunds:** Tuition must be paid in full by July 29, 2011. Neither tuition nor deposit will be refunded after August 15, 2011.

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**Applicants must have the support and commitment of their employer or organization. The signature of the Owner/Manager or President/Executive Director is necessary as an indication of the applicant's time commitment to EALI.**

**I understand the purpose of EALI and acknowledge that completion of this application does not ensure a candidate's acceptance. Attendance at each session, including the retreat, is required for graduation. If selected, I agree to commit the time and energy required.**

Signature of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_

Signature of Employer: \_\_\_\_\_ Title: \_\_\_\_\_

Date: \_\_\_\_\_

\*Payment option is based on availability and must be approved by the EALI Administrative Committee.

EALI does not discriminate among applicants on the basis of race, religion, sex, national origin, color, age, or disability.