



Leadership Academy 2019-2020 Application

The Lynda Brannen Williamson Foundation (LBWF) Leadership Academy is a personal leadership development program to improve career, mentoring, and service opportunities for women. The understanding of Leadership through women's lens will be interwoven throughout each of the sessions. Women identified for the program will be emergent leaders and will have leadership potential, career aspirations, and a commitment to community and servant leadership as a lifetime journey.

Participants will be required to attend the Opening Retreat in Athens, Georgia on September 12-13, 2019.

Mandatory Session Dates are October 10, November 14, January 16, February (Legislative Day - TBD), March 12, April 16, and May 7 (also graduation).

Applicant's Personal and Contact Information:

Name: _____

Mailing Address: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Fax: _____

Email Address: _____

Emergency Contact Name: _____ Phone Number: _____

Birthday: _____

Applicant's Professional History:

Post-Secondary Education Degree: _____

Job Title: _____

Company/Type of Industry _____

Address: _____

Number of Years in your Current Job: _____



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Participant Responsibilities

Participants must commit the time, effort, and resources required to complete the eight training sessions, as well as related readings, assignments, and project planning activities between sessions.

- ❖ I will commit the time necessary to attend all Leadership Academy training sessions and fulfill program requirements.
- ❖ I understand that I will be required to remain on-site throughout (day/evening) the entire duration of the eight scheduled training sessions and that my lack of attendance may result in the removal from the Leadership Academy and not be eligible for future involvement.
- ❖ I will ask for and obtain support from my employer(s) for time away from work needed to participate in the training sessions.
- ❖ I will read all assigned books and materials, complete self-assessments, and participate in any required activities between sessions.
- ❖ I will actively participate in all Leadership Academy group learning activities.
- ❖ I will assist and participate in the development of my class' legacy project addressing an issue of concern in my community.
- ❖ I have (or will have) timely access to adequate computer hardware and software to participate in any distance-learning activities of the Leadership Academy.
- ❖ I understand that transportation to and from all Leadership Academy sessions and activities is my responsibility.
- ❖ I will be aware of my social media activities, knowing as a participant of the Leadership Academy, I am also a representative of the LBW Foundation outside of the program.

As an applicant for the LBWF Leadership Academy, I have read the Participant Responsibilities above and hereby commit and agree to all of the conditions and requirements of the Leadership Academy.

For marketing purposes, I authorize the use of my name as a participant/alumnus of the Leadership Academy and of photographs taken during my participation in Leadership Academy activities. I understand that as a part of this program, I may participate in the creation of web pages that may contain demographic information about me, and I authorize the release of this information.

Will your \$1,000.00 participation fee be paid by yourself, your employer/sponsor, or a split between the two?
(Note: failure to pay the application fee may result in your removal from the Leadership Academy)

Do you have any special food requirements/preferences?:

Applicant Signature

Date



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Supervisor/Employer/Sponsor Contract

To be completed and signed by participant’s supervisor, employer, or person to whom the team member is primarily accountable:

As the immediate supervisor of _____, I have read the description of the Participant Responsibilities, and agree to the following:

- ❖ I will allow her time off from regularly assigned duties to participate in all required activities of the year-long Leadership Academy.
- ❖ I will support the participant(s)’ use of newly learned/developed knowledge, skills, attitudes, and competencies in her/his work.
- ❖ Please Select One:
 - _____ The \$1,000.00 Participant fee will be paid by the applicant.
 - _____ We, _____, will be paying the \$1,000 participant fee and it will be paid in full by September 1, 2019 unless other arrangements have been made..
 - _____ The \$1,000.00 participant fee for the LBWF Leadership Academy will be split between the applicant and employer(sponsor) in the following ratio:
 _____ Applicant _____ Sponsor
 and will be paid in full by September 1, 2019 unless other arrangements have been made.
- ❖ I understand that there will be no refund of the applicant fees after September 15, 2019.

Supervisor/Director Signature

Date

Supervisor Contact Information:

Name: _____

Position/Title: _____

Billing/Mailing Address: _____

Organization Name: _____

Phone Number: _____

Email Address: _____



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Recommendations

Please send two letters of recommendation in support of your application.

Recommendations should address the team member(s)' following qualities in the context of leadership:

- ❖ Character, integrity, sense of vision and purpose
- ❖ Potential to positively impact the community through service
- ❖ Potential to contribute to the Leadership Academy learning community