



LEADERSHIP MORRIS

Morris County Chamber of Commerce
25 Lindsley Drive, Suite 105
Morristown, NJ 07960
(973) 539-3882 FAX: (973) 539-3960
leadership@morrishamber.org

Criteria

Leadership Morris seeks up to 30 individuals:

- Who are committed, motivated and interested in serving Morris County in volunteer, appointed or elected leadership roles.
- Who have evidence of career or community achievement.
- Who reside, work, or do business in Morris County.
- Who represent a cross section of businesses, professions, organizations, governmental and educational institutions, and geographic areas throughout Morris County.

Instructions

- Please limit all answers to available space; no attachments will be considered.
- An interview may be required.

CONFIDENTIAL

Personal Data

Name _____ Title _____

Company/Organization Name _____

Business Street Address _____

City _____ State _____ Zip Code _____

Business Telephone _____ Business Fax _____

E-Mail Address _____

Home Street Address _____

City _____ State _____ Zip Code _____

Home Telephone _____

Years in Morris County _____

I. Education

Please list your educational background including degrees awarded, fields of study, professional institutes, training programs, etc. Include special honors or awards.

II. Employment

Please list current and past employers, length of employment, and areas of responsibility.

III. Professional Activities and Community Service

List the major civic, business and professional activities in which you have participated during the past five years. For each activity indicate the nature of your participation, including any offices you have held. Also, list awards or any special recognition you have received. Community involvement is a key selection consideration. If you have not been involved in any civic, business or professional activities, please explain why.

IV. Current Board Service

List the community organization (s), if any, which you currently serve on the Board of Directors or Board of Trustees.

V. References

List no more than two people who have knowledge of your qualifications as a Leadership Morris participant.

NOTE: The Leadership Morris Alumni Council may contact both individuals.

Reference 1

Full name _____ Title _____

Business or home address _____

City _____ State _____ Zip Code _____ Phone _____

Reference 2

Full name _____ Title _____

Business or home address _____

City _____ State _____ Zip Code _____ Phone _____

VI. General Information

Briefly describe how you expect to utilize and what you hope to gain from your Leadership Morris experience.

Please briefly identify and explain a particular issue, opportunity or problem you feel is crucial to the Morris County area.

VI. Tuition

For the current tuition rate, please refer to the upcoming session announcement/schedule. Tuition is due in full within two weeks of acceptance or prior to the Opening Retreat, whichever comes first. Although responsibility for tuition rests with the participant, partial financial assistance may be available to a limited number of applicants. (Financial need is not considered in candidate selection.)

Check One:

MCCC member tuition, \$2,000

Non-member tuition, \$3,000

I need tuition assistance (*If checked, please explain and indicate the amount of assistance required.*)

VII. Refund Policy

Withdrawal from the program following confirmation to participants will result in forfeiture of tuition unless an alternate is confirmed prior to the first session.

VIII. Attendance Policy

In order for Leadership Morris to accomplish its stated goals, the full participation of each individual is mandatory. *If you are unable to make a commitment, it is not in your best interest to apply at this time.* The following will result in termination from the program with no tuition refund:

- Nonattendance at the opening retreat
- More than two (2) excused absences during the program year
- Late arrival or partial attendance at any session in excess of three (3) occurrences
(Any time over 1-1/2 hours late or 1-1/2 hour early leave)
- Non-participation in the board service requirement

IX. Declaration Upon Completion of Application

Nominees for the Leadership Morris program must have the support and commitment of their sponsoring business or organization. The signature of the head of the sponsoring organization is necessary as an indication of the support of the nominee's participation in Leadership Morris.

Signature of Sponsor _____ Title _____

In submitting this application, I hereby declare:

- That I have read the above statements.
- That to the best of my knowledge and belief, the information I have given is true and accurate.
- That except for circumstances beyond my control, I will undertake to complete the program in its entirety.

Signature of Applicant _____ Date _____

Mail or deliver completed application to:

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