

Application Form

| First Name: | Last Name: | |
|--|--|-----------------|
| Male Female | Age: | |
| Employer: | Position: | # of years |
| Supervisor: | Position: | |
| Superviser's email address: | | |
| Business Address: | | |
| | City | State Zip |
| Home Address: | City | State Zip |
| Telephone:Business | · | |
| Business | Cell | |
| Email address: | | |
| diversity present in our community. How many years have you lived in Da | pecause <i>Leadership Dakota County</i> seeks akota County?ota County? | |
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| Past Employment: Company | Position | Number of Years |
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| Educational History (list most | , | |
|--|--|--------------------------|
| <u>School</u> | <u>Degree/Certificate</u> | Year completed |
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| | | |
| Current and Past Organization | nal Affiliations | |
| Current and Past Organization Organization | | |
| Position held: | Dates: | |
| 1 oshion neta. | <u> </u> | |
| Organization | | |
| Position held: | Dates: | |
| | | |
| Organization | | |
| Position held: | Dates: | |
| Organization | | |
| Position held: | Dates: | |
| 1 osition neid. | Dates | |
| | | |
| Why are you interested in parti | cipating in Leadership Dakota County? | |
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| How will you use what you lea | rn to give back to Dakota County? | |
| now will you use what you rea | in to give buck to bukota county. | |
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| | are you willing and able to commit the time to a | |
| Dakota County (from 11:30 pm | 1-4:30 pm) and to participate in a team project | outside of the sessions? |
| | | |
| Any concerns? | | |
| <u>,</u> | | |

Thanks for your interest. Please complete this application and submit with a professional (head shot) photo to:

- Electronically to Pam Miller at miller4321@hotmail.com
- Mail or drop off hard copy to: South Sioux City Chamber
 4401 Dakota Avenue
 South Sioux City, NE 68776

Deadline July 31st