Denison Leadership Institute A Program of the Denison Area Chamber of Commerce	Enrollme Applicate 313 W. Woodard St., PO Box 3 Denison, TX 75020 Phone: 903-465-1551 / Fax: 903-44	ion Derison	
Date:			
Full Name —————————		Nickname ———	
Address		T-ShirtSize	
City Sta	ate ZipCode	PhoneNumber	
email	Age	Gender: Male	
Spouse's Name	How Long in Grayson	Female County?Denison?	
Employment Information Present Employer Date of Hire ——— Title & F			
Immediate Supervisor / Title			
Address			
City	StateZip Code		
Denison Leadership Institute. Signature	iderstand the attendance policy a	and do support applicant in participating in the	
Former Employers:			
Employer:	Title	Dates	
Employer:	Title	Dates	

Education: Please list highest level of formal education

School Name		Da	tes		
Degree/Certificate					
Community Involvement Plea	ase list organi	zations of which yo	u are a mem	ber.	
Organization Name			Posi	tion held	
Membership Dates					
Organization Name			Posi	tionheld	
Membership Dates					
Organization Name			Posit	ion held	
Membership Dates					
Please list any honors or awards received:					
References					
Name			_	Relationship	
Address				Phone Number	
City	State	Zip Code			
Name				Relationship	
Address				Phone Number	
City	State	Zip Code			
What do you hope to gain from participating in the Denison Leadership Institute? —					
How do you think you will give to this community as a past participant in the program? 					

Commitment

The Denison Leadership Institute is planned to be a learning experience and requires attendance at the monthly meetings, which are full-day sessions, over a period of eight months.

- I understand that attendance at the opening session is MANDATORY.

- I understand that no more than 2 sessions may be missed due to illness, injury, or emergency and that if more than 2 absences occur I will be dropped from the course without a refund.

- I understand that the tuition of \$400 is payable prior to the opening session (unless prior arrangements have been made). Tuition covers the cost of speakers, educational materials, lodging, meals and travel to and from Austin for the State Government session.

I request a payment option plan for the tuition fee

Signature

Please return this form to the Denison Area Chamber of Commerce office no later than August 1, 2017.

You may fax it to 903-465-8443, mail it to PO Box 325, Denison, TX 75021, bring by the office at 313 W. Woodard Street, Denison, or email it.

If you have any questions, please call the Chamber office at 903-465-1551.