



Leadership Illinois Candidate Application

Leadership Illinois invites qualified candidates to apply to Leadership Illinois. To be considered for selection into the class, please complete the following application and return it with required attachments to be received **by the first Monday of December**. Candidates will be notified of Leadership Illinois' decision **no later than the last Monday in March**.

REQUIRED INFORMATION

Date: _____

Name _____

Home Address

_____ Street City Zip

Date of Birth _____

Organization/Employer _____

_____ For profit business _____ Non profit business

Position/Title _____

Organization/Employer Mailing Address

Street Address, including suite, etc.

_____ City State Zip *County

Employer website address: _____

Home Phone _____ Business Phone _____

Cell Phone _____

Fax _____ Email _____

Where do you prefer to receive mail? Home _____ Business _____

How do you prefer to receive communications: Email _____ Mail _____

Optional Information

Leadership Illinois is committed to diversity and encourages applicants of all ethnic/racial groups. The following information is not required but will help us ensure we meet our commitment. Please check the following that best describes you:

Native American/Alaskan Native White/Caucasian
 Hispanic

Native Hawaiian/Pacific Islander Black/African American
 Asian

Please indicate any disability you have:

Please indicate any food requirements you have: _____

Financial Assistance

Partial scholarships are available. If you require financial assistance, please check here: _____

Nominator Information

Name of Nominator _____

Leadership Illinois member? Yes No

Telephone _____ Fax _____

Email Address _____

Your relationship to the Nominator _____

Is this a self-nomination? Yes No

*If this is **not** a self-nomination, a letter from your nominator **must** be included with your application.*

APPLICATION NARRATIVE

On a separate sheet of paper, please respond to the following questions (**typed responses required**):

1. Describe why you would be an asset to the Leadership Illinois program, including special talents you will bring.
2. Briefly describe the organization with which you are employed or associated, including description of core business, number of years in business, etc.
3. Describe your current position/role and the leadership you have displayed in your current position.
4. Please attach your current resume, **no longer than 2 pages**.
5. List the most important award or recognition you have received and briefly explain why you feel it is the most important.
6. List your most important civic leadership involvement and briefly explain why you feel it is the most important.
7. Discuss the accomplishments that you consider significant in your development as a leader.
8. If you are requesting scholarship consideration:
 - a. Specify the circumstances of the need.
 - b. Specify how Leadership Illinois will benefit by providing you with a scholarship

LETTERS OF RECOMMENDATION

Three letters of recommendation must be submitted. A letter must be received in each of these categories:

- personal reference
- business reference
- civic reference

The nominator's letter may reflect one of these areas.

LEADERSHIP ILLINOIS VISIONARY SPONSOR



CONFERENCE INFORMATION

The conference dates and locations for the 2010 class are:

May 4-7	The Power of Government, Springfield
July 14-16	The Power of the Individual, Champaign
September 22-24	The Power of the Marketplace, Chicago

Interested candidates must complete all three sessions in their entirety in order to graduate from the program. All class members are required to stay in the conference hotel during each conference.

Tuition for the three conferences is \$1,200.00. Upon notification of selection to the Leadership Illinois class, class members are required to immediately submit a non-refundable \$200.00 membership deposit to hold their place in the class. The balance of the tuition (\$1,000.00) must be paid in full by April 12, 2010. Expenses to attend conferences, such as travel, lodging, and meals outside of the conference are not included and are the responsibility of the participant.

Tuition, including the \$200.00 membership deposit, is non-refundable.

Mark the Appropriate Space(s)

- My organization is prepared to cover the tuition requirement if I am accepted.
- My organization will not cover the tuition requirement, but I guarantee that the fee will be paid if I am accepted.
- I would like to be considered for a partial scholarship and have included the required information in the Application Narrative.

Candidate Certification

I certify that all of the statements made in this application are true, complete and accurate to the best of my knowledge and have been made in good faith. I know and understand that any and all components of my application may be verified by Leadership Illinois. If selected, I have company/organization support for my participation, where applicable, and will attend the three conferences. Further, if selected, I will arrange for immediate payment of the \$200 membership deposit with the balance of the tuition paid in full prior to April 12, 2010.

Candidate Signature

Date