CONFIDENTIAL APPLICATION FOR APPOINTMENT

INSTRUCTIONS
Type or print in blue or black ink. Complete each section fully. Failure to complete application in full and submit by the deadline may result in forfeiture of inclusion in the selection process. Application must be signed by the applicant and employer, if applicable. Keep this page for your records; return ONLY completed application (attached).

SELECTION CRITERIA
Participation in LEADERSHIP COSHOCTON COUNTY is open to persons residing or working in Coshocton County. Candidates should have:

- a demonstrated commitment to the community
- an interest in assuming greater responsibility
- the intention to remain employed or a resident in the county
- the full support of employer (if applicable)
- the ability to attend all sessions (please check website for current program dates)

The number of participants in LEADERSHIP COSHOCTON COUNTY is limited. Please check the website for tuition information and current program dates. Candidates may apply personally or be nominated by employers or other interested persons.

A conscious effort is made to select a diverse group that represents Coshocton County. Due to size constraints, it is inevitable that qualified candidates may not be selected. Applicants not selected are encouraged to re-apply for Leadership Coshocton County. Likewise, nominators are encouraged to re-submit names for consideration.

Attendance at both Opening Retreat including an overnight stay and Closing Retreat is mandatory. Please check the website for current program dates. While emergencies arise, any participant missing more than one regular session will be required to complete an alternate activity or attend the day missed within one year before being recognized as a graduate of LEADERSHIP COSHOCTON COUNTY.
LEADERSHIP COSHOCTON COUNTY Application Deadline: June 1

Date: ____________________

Name: ________________________________________________

Home Address: __________________________________________

Home Phone: ___________________________ Cell Phone: ___________________________

Home email: ___________________________________________ Prior Applicant? ☐ Yes (Year______) ☐ No

Employer: _____________________________________________ Position: ___________________________

Business Address: _______________________________________

Business Phone: ___________________________ Business E-mail: ___________________________

Preferred Mailing Address: (circle one) Work Home Preferred Email: Work Home

Length of employment with current employer: _____ years

If less than one year:

Previous employer: _______________________________________

Position: _____________________________________________ Length of Employment: _____ years

Describe your work responsibilities: __________________________

What do you consider to be your highest career achievement to date?

_________________________________________________________________________

_________________________________________________________________________

Organization/Professional Affiliations or Service Clubs (Kiwanis, Rotary, etc.)

_________________________________________________________________________

_________________________________________________________________________

Board Service or other volunteer experience; please give organization name and dates of service

_________________________________________________________________________

_________________________________________________________________________

Why are you interested in participating in Leadership Coshocton County?

_________________________________________________________________________

_________________________________________________________________________

_________________________________________________________________________

What do you hope to gain from this experience? __________________________

_________________________________________________________________________

_________________________________________________________________________

Continued on back
Which of the following categories best describe your present area of leadership activity or interest?

Human Service  Government  Labor  Religion  Business/Industry
Medi a  Education  Medical  Law  Volunteerism
Civic Organizations  Art  Other (specify):_______________________________________

What do you believe are the three most pressing problems facing Coshocton County?
1._________________________________________________________________________________
2._________________________________________________________________________________
3._________________________________________________________________________________

What do you believe are the three greatest opportunities in Coshocton County?
1._________________________________________________________________________________
2._________________________________________________________________________________
3._________________________________________________________________________________

References: Please list two people who are familiar with your leadership performance and potential and could attest to your commitment to this program:

Name:_________________________  Name:_________________________
Email:_________________________  Email:_________________________

Nominator: (If same as the candidate, write “SAME” on the name line.)

Name:_________________________
Address:_________________________
Email:_________________________  Cell phone:_________________________

Comments about the candidate:
_________________________________________________________________________________
_________________________________________________________________________________

The success of Leadership Coshocton County is dependent upon each participant’s commitment to attend monthly sessions. No more than one absence is permitted in order to graduate from the program. I will be able to honor this significant time commitment. I will receive support from my employer and my family. Tuition payment must be received in full prior to the Reception in August. Upon acceptance an invoice for tuition will be provided.

Signature of Applicant  Date

Signature of Employer (if applicable)  Date

Please return to: Leadership Coshocton County • 220 S. Fourth St. • P.O. Box 55 • Coshocton, OH 43812
Email: lead@coshoctonfoundation.org  Or Fax to: 740-622-1660, attn.: Leadership