

2009/2010 LPR Class Application

Application Deadline: August 31, 2009 / *Attach additional sheets if necessary.*



Name (Last, First, Middle) _____

County _____ State Senate District _____ State House District _____

Hm Address _____

City _____ State _____ Zip _____

Home Phone _____ Work Phone _____

Professional History

Current Employer _____ Title/Position _____

Work Address _____ City _____ Zip _____

Email Address _____ Fax _____

Job Description: _____

PAST EMPLOYERS

Name _____

Address _____ Title/Position _____

Name _____

Address _____ Title/Position _____

Name _____

Address _____ Title/Position _____

Professional Achievements and Highlights

Describe any outstanding contributions made by you in your work.

List the major business and professional activities in which you participated in the last five years.

Educational Background

Please provide the following information about your education, high school and beyond.

List and describe any major extracurricular activities.

Name/Location of Schools	Degree & Field of Study	Special Honors/Awards

Civic Participation

Please list the major civic, social, educational and political activities in which you've participated the past five years. List the organization and your role. How have you made a difference? Note any awards or special recognition.

Issue Focus

Please describe an issue or opportunity that is crucial to our state or nation. What are your recommendations for a solution?

Leadership

Why do you want to participate in the Leadership Program of the Rockies? How will you utilize the education you receive?

Future Ambition

What do you hope to achieve in the future in terms of public policy?

Financial Obligation

Tuition information coming soon.

References and Participation

Applicants will be requested to participate in a personal interview in September. If there are times during that period you're not available, please indicate the dates below:

Please provide two letters of recommendation with this application. Please provide the information requested below from those who are writing your letters of recommendation.

1. Name	Title	Office Phone
Business Occupation	Address	
City	State	Zip

2. Name	Title	Office Phone
Business Occupation	Address	
City	State	Zip

The program consists of nine sessions, October through June, the second Friday of every month, with some exceptions. The required participation is 100% of the sessions. Any participant that needs to miss a session must get prior approval from the President. Absences not approved in advance will be charged a \$50 meeting fee. Absences may be cause for dismissal from the program. There are no refunds of tuition.

If selected, can you devote the required time to this program? ____ Yes ____ No
I have read the above statement and agree to the terms.

X Signature of Applicant	Date
---------------------------------	------

Send application, 2 letters of recommendation and 1 Nomination Form by August 31, 2009 to:
Leadership Program of the Rockies, c/o Shari Williams, President
1777 South Harrison Street, Suite 807, Denver, CO 80210
EMAIL: email AssistantDirector@leadershipprogram.org FAX: 303-488-0068

For more information call (303) 488-0018, email AssistantDirector@leadershipprogram.org
or visit www.leadershipprogram.org