



Leadership Durant Class of 2019-2020

What is Leadership Durant?

Leadership Durant is for professionals who desire to learn more about their community and develop or further enhance their leadership skills. Individuals exit the class having identified and molded their specific leadership skills.

Leadership Durant begins each year in July with a reception and is completed in June with graduation. The class meets for one day every month with the exception of December. They will participate in activities ranging from team building exercises to visiting area media, city, county, and state officials. They will also tour schools, hospital, and other areas of interest, such as museums and the Oklahoma State Capitol in Oklahoma City. Additional activities and class fundraisers will be scheduled throughout the year.

The first meeting for the new class will be a reception held in July 2019. The first class day is Orientation held in August 2019 at which point each student will receive their Leadership Durant portfolio and the class agenda for each month.

It is important to note that students and employers must commit to this program for it to be effective.

Former class members include Vice Presidents of Banks, Business Owners, Managers, Teachers, Professors, Law Enforcement Officers, Attorneys, Administration personnel and many more.

Please contact the Durant Area Chamber of Commerce at 580-924-0848 or visit www.durantchamber.org for more information.

Attach recent 2 x 3
photograph.

Leadership Durant Class of 2019-2020

I. Personal Data

Last Name First Middle Prefer to be called

Company/Association Position/Title Length of Service

Business Address City/Zip

Business Phone Fax Email

Home Address City/Zip

Home Phone Cell Phone Email

Name of Spouse Children (names & ages)

Date of Birth T-Shirt Size

Have you ever been convicted of a Felony? Yes No

Briefly describe your primary occupation and duties.

II. Previous Employment (most recent first)

Employer

Title or Responsibility

III. Education (most recent first)

Name & City

Dates

Degree

Major

IV. Organizations/Activities/Community Involvement

Describe your current business, volunteer, civic, community and worship-related activities, noting any special awards and citations. Include specific examples of your leadership experience.

Organization

Position(s) Held

No. of Hours Monthly

Past Involvement

Organization

Dates

Position(s) Held

V. Participation

In order to accomplish the objectives of the Leadership Durant program, the full participation of each individual selected is necessary. Absenteeism will result in being dropped from the course. Only one (1) absence is allowed from regularly scheduled class days. Any time a class member misses a meeting the member will need to write a letter explaining their absence and have their supervisor sign the letter in order for the absence to be excused. You will have seven (7) days after the missed meeting to do so. If, because of extreme hardships, you will not be able to have the letter signed by your supervisor and delivered in time then you will need to contact the Executive Director of the Chamber to request additional time. It will be within the Executive Director's sole discretion to determine the legitimacy of your need for additional time. Excused absences are for health and other compelling reasons. Two unexcused absences will result in not being allowed to graduate from the Leadership Durant program. Participants must commit to miss no more than one session of the Leadership Durant course - at least one day per month from August – June, excluding December. You and/or your employer must be willing and able to make such a commitment. If you are unable to make this commitment, it is not in your best interest to apply at this time.

Will you be able to fulfill this time commitment? YES NO

Do you have the full support of your employer for the time required to participate effectively in Leadership Durant? YES NO

VI. Tuition

If you are accepted as a participant, you will be billed for the \$350 tuition. Payment may be made in installments, with the total due on or before July 31, 2019. Tuition includes a one-year, individual membership to the Durant Area Chamber of Commerce if you are not already a member.

Please check all that apply:

- My employer is prepared to cover the \$350 tuition (employer signature below).
- I will assume responsibility for the full tuition if accepted.
- I want to be considered for a partial needs-based scholarship and am enclosing a brief statement explaining why I am requesting financial assistance. I understand that I may be contacted for additional information concerning this request.

Employer's Signature _____ Date _____

To the employer:

Name of applicant’s direct supervisor_____

Phone number for supervisor _____

Supervisor’s Signature_____ Date _____

Do you anticipate long-term employment for the above applicant? Yes No

VII. Application Process

All applications are subject to confidential evaluation and a personal interview by the Leadership Durant committee. If you are not selected to participate in the Leadership Durant program, your biographical data will be retained by the committee for consideration of later enrollment. *Applications must be returned to the Durant Area Chamber of Commerce – 215 N 4th Ave. Durant, OK 74701 – by June 13, 2019 at 4:00 p.m. Personal interviews will be conducted June 18-20, 2019 and acceptance letters will be mailed out on or before June 27, 2019.*

Please include the following with your completed application:

- 1. On a separate sheet, explain why you want to be selected for Leadership Durant.**
- 2. Attach two (2) letters of recommendation – Including one (1) from the person who nominated you.**
- 3. Resume**
- 4. Photo**

I understand the purpose of the LEADERSHIP DURANT program and that completion of this application does not insure my acceptance in the next class. If selected to participate, I will devote the time required. I also understand that the tuition fee will not be refundable to any participant dropped from the program. I certify that all of the statements made in the application are true, complete, and correct to the best of my knowledge and are made in good faith. I know and understand that all items herein may be verified.

Applicant’s Signature

Date

Nominated By:

Phone Number