

SIKESTON

CHAMBER

Leadership Sikeston 2025

Participant Application

1. PERSONAL INFORMATION *Please list your name as you want shown on your graduation plaque.*

Name _____ Home Address _____

Business Name _____ Position Title _____

Business Address _____ Business Phone _____

Cell Phone _____ Email _____

Years in Current Position _____ Years in current industry _____ Years in Sikeston region _____

Have you applied for Leadership Sikeston before? _____

2. INVOLVEMENT *This will be used as part of our selection criteria.*

Business/Professional Organizations

Community/Civic Organizations

3. ESSAY *Please provide 100-200 words on why you would like to participate in Leadership Sikeston. This will be used as part of our selection criteria. (feel free to attach separate sheet)*

4. INFORMATIONAL GATHERING *This information is not part of the selection process, but please provide the following information to help us tailor the program to current issues.*

In your opinion, what are the three most critical problems/issues facing the Sikeston Region today?

1. _____
2. _____
3. _____

5. EMPLOYERS AGREEMENT – REQUIRED TO APPLY

I fully support the applicant _____ for the 2025 Leadership Sikeston program, and I represent that his/her employer will make available the necessary time for full participation in **all scheduled classes and activities**.

Signature: _____ Date: _____
Print Name: _____

6. APPLICANT’S AGREEMENT

If selected as a participant in Leadership Sikeston, I am willing to attend all functions sponsored by the program, and I understand **attendance is mandatory**. I understand if I fail to meet any obligations of the program, I may be asked to withdraw and may not graduate with my class. I understand I am to notify the Chamber office when I am unable to attend a session. **I understand that if I miss more than one session, I will need to make up the session the following year in order to graduate.**

Signature: _____ Date: _____

7. TUITION

If accepted into the Leadership Sikeston program, you or your organization will be billed for **the tuition fee of \$500 for Sikeston Regional Chamber members or \$600 for non-Chamber members**. Tuition covers supplies, meals, transportation, and speakers during the sessions **Tuition must be paid in full by March 1, 2025 and is non-refundable.**

My tuition will be paid: _____ personally _____ by my organization

To be considered, this completed application must be returned to taylor.deere@sikeston.net by noon on January 31, 2025. Participants will be notified of acceptance no later than end of business on February 7th, 2025.

The Sikeston Post
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Sikeston, MO 63801
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