



A premier program of the
Greater New Haven Chamber of Commerce
sponsored by
WIGGIN AND DANA

Greater New Haven Leadership Center
Leadership Greater New Haven Class of 2011
Confidential Participant Application

Please select one:

- \$1,700:** Businesses with less than 30 employees; municipalities; non-profit agencies (qualified non-profit agencies are eligible for scholarships)
- \$2,600:** Businesses with between 30 and 100 employees; colleges and universities; large non-profit organizations
- \$3,700:** Businesses with more than 100 employees

Mr./Ms./Mrs./Other _____ Date of Birth _____

Name _____

Title _____

Company/Organization _____

Business Address _____

Business Telephone _____ Business Fax _____

E-Mail _____

Home Address _____

Home Telephone _____

Briefly Describe Your Business Leadership Experience _____

What Do You Think are New Haven and the Region's Biggest Assets? _____

What Do You Think are New Haven and the Region's Biggest Challenges? _____

EDUCATIONAL BACKGROUND

Briefly summarize your educational background. List certificates/degrees/licenses received, and field(s) of study.

PROFESSIONAL BACKGROUND

Briefly summarize your field of expertise.

COMMUNITY INVOLVEMENT

Please list any volunteer activities you are participating in AT THIS TIME. Please list organization and length of each volunteer experience.

Please list significant community or job related organizations (civic, political, religious or cultural) in which you have participated.

Organization

From To

Responsibilities

COMMUNITY NEEDS

In your judgment, what are the three most pressing problems facing Greater New Haven? Please explain why you feel these issues are important.

What regional leaders would you like to hear from in the LGNH program?

GENERAL

What do you hope to gain from the Leadership experience? Skills/Knowledge

What are your reasons for wanting to participate in Leadership Greater New Haven?

SIGNATURES

Applicant _____

Date _____

Employer* _____

Date _____

Title _____

Date _____

*Employer’s signature represents endorsement of the candidate and commitment of the time for the applicant to attend monthly program sessions.

Program Sponsor _____

A limited amount of funds are available for program scholarships for participants from non-profit agencies. Please indicate if you are interested in applying for a partial scholarship:

Please send me a scholarship application

PLEASE FORWARD APPLICATION ALONG WITH TWO LETTERS OF RECOMMENDATION TO:

Patricia A. Scussel, Executive Director, Greater New Haven Leadership Center
900 Chapel Street, 10th Floor, New Haven, CT 06510
Phone: 203-782-4314; Fax: 203-782-4329; E-mail: pscussel@gnhcc.com