

APPLICATION 1438 W. Broadway Rd. #213 Tempe, AZ 85283 Phone: (480) 967-7891 Fax: (480) 966-5365 www.tempeleadership.org

Application must be completed in its entirety in order to be considered. Use the space provided. You can submit to tempeleadership@gmail.com *Applications are due May* 5, 2022

NAMELast	First		Middle	
			Widdlo	
HOME ADDRESS Street		City		Zip
PHONE ()	CELL ()		
PREFERRED EMAIL				
Years lived in AZ	Years lived/worked in Tempe	ived/worked in TempeRegistered voter?		tered voter?
How did you find out about the program?				
Did you attend the Recruitment Reception?	Referred by			
EMPLOYMENT HISTORY				
PRESENT EMPLOYER	HIRE DATE			
PRESENT TITLE/POSITION	SINCE			ICE
ADDRESS	(City	(_) Phone
SUPERVISOR		,	•	_)
PREVIOUS EMPLOYMENT				
Employer	your title		from/to	
Employer	your title		from/to	

EDUCATIONAL HISTORY

Post-Secondary:		
School	Degree	Date(s)
School	Degree	Date(s)
High School	Graduation Da	ite
CLASS COMMITMENT		

Tempe Leadership requires participants to commit approximately 1 ½ to 2 days per month during the 9 months of the program (Sept. – May). If selected, are you and your employer prepared to make this time commitment?

Have you applied to Tempe Leadership before? _____ If yes, when? _____

COMMUNITY INVOLVEMENT

Tempe Leadership recognizes that involvement comes in many forms. We are interested in selecting individuals who have a commitment of time, energy and enthusiasm for their community. Please list, in order of importance to you, three community, Civic, professional, political, business, religious, social, athletic, or other activities in which you have participated. Include your contribution to each, including positions held, major responsibilities, projects under taken and YOUR measures for success.

1.

2.

QUESTIONS:

1. What do you hope to gain from participating in Tempe Leadership? What are your expectations of the program?

2. Upon graduation, Tempe Leadership hopes that its graduates will take an active role in the community. How do you expect or hope to put your Tempe Leadership experiences to work in our Tempe community?

3. There are many issues facing the Tempe community. Describe two community issues that interest you and why they are of interest.

List two persons who will be contacted to provide information regarding your qualifications as a Tempe Leadership participant. If you are not retired or self-employed, please include your supervisor as one of your references.

REFERENCE 1

NAME	Title	Relation	shin	
	nue	Reidiloi	Ship	
ADDRESS				
Street		City	Zip	
()	(()		
Business phone	Ho	Home phone		
REFERENCE 2				
NAME				
	Title	Relationship		
ADDRESS				
ADDRESS Street		City	Zip	
	1)		
()Business phone	(/ Home phone		
Signature		Date	_	
-				
As the supervisor/employer of the Tempe Le applicant with the time away from the workpla		tment of the training prog	am and agree to provide the	
Signature		Date		
PROCEDURE : Please fill out the form on this June 30, 2021, following the June Council me			Il be notified of the results by	
DEADLINE FOR APPLICATION: May 5, 202	2			
TUITION FEES : Tempe Leadership class mer 2020, unless formal arrangements have be available, with final payment due no later than	een made with the Tempe Leadership Cou			
Please mail this form to the Tempe Chamber of email it to tempeleadership@gmail.com	of Commerce, Attn.: Tempe Leadership, 1438	3 W. Broadway Rd. Ste. 2	13, Tempe AZ 85283 OR	

QUESTIONS? info@tempeleadership.org or info@tempechamber.org Phone: Tempe Chamber of Commerce (480) 967-7891