



## LEADERSHIP GLENDALE CLASS OF 2021 APPLICATION

HOW DID YOU HEAR ABOUT OUR PROGRAM? – CHECK APPLICABLE BOX

CHAMBER WEBSITE  SOCIAL MEDIA/ONLINE  EVENT  REFERRED BY \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

### APPLICANT INFORMATION

NAME:		TITLE/POSITION:		
BUSINESS/ORGANIZATION NAME:				
ADDRESS:		CITY:	STATE:	ZIP CODE:
PHONE:	CELL:	EMAIL:		
DATE OF BIRTH: _ _ / _ _				

### EDUCATION

HIGH SCHOOL (CITY/STATE):	
COLLEGE/UNIVERSITY:	DEGREE:
COLLEGE/UNIVERSITY:	DEGREE:
ADDITIONAL TRAINING:	
LEADERSHIP POSITIONS:	
COMMUNITY INVOLVEMENT:	
INTERESTS/HOBBIES:	

### TUITION

TUITION: \$1,500	TUITION BENEFITS: COVERS ALL SESSIONS, WORKSHOPS, MEALS, MATERIALS
ALL APPLICATIONS MUST BE ACCOMPANIED BY A \$200 DEPOSIT MAKE CHECKS PAYABLE TO: THE GLENDALE CHAMBER OF COMMERCE	PAYMENT OPTIONS AVAILABLE, PLEASE INQUIRE VIA EMAIL/PHONE

### APPLICATION DEADLINES

ENROLLMENT OPENS: FEBRUARY 2020	DEADLINE: <b>FRIDAY, SEPTEMBER 18, 2020</b>
ALL APPLICATIONS MUST BE ACCOMPANIED BY A \$200 DEPOSIT	

### APPLICATION SUBMISSION

SUBMIT APPLICATIONS IN PERSON: LEADERSHIP GLENDALE C/O GLENDALE CHAMBER OF COMMERCE 701 N. BRAND BLVD., #120 GLENDALE, CA 91203	EMAIL: INFO@GLENDALECHAMBER.COM	FAX: 818.240.2872
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### 2020-2021 CLASS SCHEDULE

ORIENTATION: <b>WEDNESDAY, SEPTEMBER 23, 2020</b>	TIME: 5:30PM – 8:30PM	LOCATION: TBD
FRIDAY CLASSES: OCTOBER 2, NOVEMBER 6, DECEMBER 4, JANUARY 8, FEBRUARY 5, MARCH 5, APRIL 2, MAY 7, JUNE 4		
TIME: 8:30AM – 4:30PM	LOCATION: TBD. TRAVELING INVOLVED	
CLASS PROJECT: IN ADDITION TO FRIDAY CLASSES, PROJECT DATES WILL BE PLANNED AND SCHEDULED BY THE CLASS		

### FOR ADDITIONAL INFORMATION

<b>JUDEE KENDALL</b> - GLENDALE CHAMBER OF COMMERCE PRESIDENT - CEO	
PHONE: 818.240.7870	EMAIL: JKENDALL@GLENDALECHAMBER.COM
<b>TAGUHI SOGOMONYAN</b> - LEADERSHIP GLENDALE PROGRAM DIRECTOR	
PHONE: 818.599.5933	EMAIL: TSOGOMONYAN@GLENDALECHAMBER.COM

### AGREEMENT

AS A MEMBER OF THE LEADERSHIP GLENDALE CLASS OF 2021, I AGREE TO MAKE EVERY EFFORT TO ATTEND AND PARTICIPATE IN ALL ACTIVITIES. IF I AM UNABLE TO ATTEND, I WILL NOTIFY THE CHAMBER OR PROGRAM DIRECTOR IN ADVANCE.

### SIGNATURE

PRINTED NAME: _____	DATE: _____
	