



LEADERSHIP GLENDALE CLASS OF 2025 APPLICATION

HOW DID YOU HEAR ABOUT OUR PROGRAM? CHECK THE 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, AND MATERIALS

ALL APPLICATIONS MUST BE ACCOMPANIED BY A \$200 DEPOSIT PAYMENT OPTION AVAILABLE, PLEASE INQUIRE
MAKE CHECKS PAYABLE TO: GLENDALE CHAMBER OF COMMERCE VIA EMAIL/PHONE

APPLICATION DEADLINES

ENROLLMENT OPENS: MARCH 2024 DEADLINE: FRIDAY, SEPTEMBER 13, 2024

ALL APPLICATIONS MUST BE ACCOMPANIED BY A \$200 DEPOSIT

APPLICATION SUBMISSION

SUBMIT APPLICATIONS BY MAIL OR 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

2024-2025 CLASS SCHEDULE

ORIENTATION: THURSDAY, SEPTEMBER 19, 2024. TIME: 2:00 PM – 4:00 PM DETAILS: TBA

FRIDAY CLASSES: OCTOBER 4, NOVEMBER 1, DECEMBER 6, JANUARY 3, FEBRUARY 7, MARCH 7, APRIL 4, MAY 2, JUNE 6

TIME AND LOCATION: TBA DETAILS: TBA

CLASS PROJECT: IN ADDITION TO FRIDAY CLASSES, PROJECT DATES WILL BE PLANNED AND SCHEDULED BY THE CLASS

FOR ADDITIONAL INFORMATION

JUDEE KENDALL - GLENDALE CHAMBER OF COMMERCE PRESIDENT - CEO

PHONE: 818.240.7870 EMAIL: JKENDALL@GLENDALECHAMBER.COM

TAGUHI SOGOMONYAN - LEADERSHIP GLENDALE PROGRAM DIRECTOR

PHONE: 818.599.5933 EMAIL: TSOGOMONYAN@GLENDALECHAMBER.COM

AGREEMENT

AS A MEMBER OF THE LEADERSHIP GLENDALE CLASS OF 2025, 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: _____

