

Leadership Ohio Valley Application

Name: First _____ Middle Initial _____ Last _____
Home Address _____ City _____ State _____ Zip _____
Home Telephone _____ Cell Phone _____ Male _____ Female _____
Emergency Contact _____ Phone Number _____
Do you have any food allergies or physical limitations that you would like to list? _____

Employment

Business Name _____
Business Address _____ City _____ State _____ Zip _____
Business Phone _____ Business Fax _____
E-Mail **(Please list an email address that the Chamber and the Leadership class can use to contact you.)** _____

Present Title _____ Length of Employment _____
Describe Job Responsibilities _____

Name and Title of Direct Supervisor _____
Do you have the support of your employer to participate in Leadership Weirton? _____

Education

College/Trade School _____ City & State _____ Degree/Year _____
High School _____ City & State _____ Degree/Year _____
Other _____ City & State _____ Degree/Year _____
Community, Professional, Educational Honors and Recognition; Interests; Extracurricular Activities _____

To successfully complete Leadership Ohio Valley, you must complete the requirements on the Requirement Sheet

Can you make this time commitment? Yes _____ No _____

I understand the purpose of the **Leadership Ohio Valley** program and will devote the time required for its successful completion.

Applicant's Sponsor _____
Sponsor's Business or Organization _____
Sponsor's Signature _____ Telephone Number _____
Applicant's Signature _____ Date _____

Full tuition of \$350.00 for Chamber Members/\$400 for non Chamber Members is due upon acceptance into **Leadership Ohio Valley**. Either the participant or the sponsor may make payment.

Return completed application to the Chamber as soon as possible - class size is limited

Leadership Ohio Valley
Weirton Area Chamber of Commerce
3174 Pennsylvania Ave. Suite 1
Weirton, WV 26062
304-748-7212

College credit will be given through WVNC upon completion of this program