



A Program of the St. Lucie County Chamber of Commerce

The Mission

Leadership St. Lucie identifies and develops diverse leaders who impact the community through leadership.

The St. Lucie County Chamber of Commerce began the leadership program in 1983 to help participants become proactive community leaders. The program includes a series of discussions and site visits developed to expose participants to the greatest challenges and opportunities facing the community today.

A selection committee comprised of Leadership alumni will review your application to Leadership Saint Lucie. It is recommended that you put thought and attention into your responses. While all the information you provide is important, during their review, they will place great emphasis on the organizations for whom you volunteer, the leadership positions you hold or held in those organizations, your understanding of challenges St. Lucie County faces and the personal objectives you want to achieve from participating in the program. The program looks for candidates who are committed to the welfare of the community and want to assume responsibility for its leadership.

The two-year program begins in January with a mandatory orientation and one-day Team Building session. After Orientation and Team Building in January, the class meets once a month for 10 full-day programs. The second year participants design the sessions for the next class and participate on a chamber committee.

Each day-long class focuses on a different aspect of the community, including

- Education
- History
- Health & Human Services
- Government
- Economic Development
- Other quality of life issues

In order to graduate, participants must attend at least nine of the 11 sessions.

Tuition for the program is \$945 and is payable by the individual, their employer or the sponsoring organization. Tuition covers meals, any materials and transportation. Partial financial assistance is available on a limited basis.

Deadline is Friday, October 1st

Personal Information

Salutation: Mrs. Ms. Mr. Dr.

Last Name: _____ First Name: _____ Middle Initial: _____

Preferred First Name for Name Badge: _____ Years in St. Lucie: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Cell Phone: _____

Business/Organization: _____ Phone: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Please mark your polo size: Small Medium Large XL XXL
Ladies Men

Home Email: _____ Office Email: _____

I prefer to receive Leadership St. Lucie agendas and notices, e-mailed to: Home Office

Any physical limitations? If so, please describe.

Date of Birth: Under 20 21-30 31-40 41-50 51-60 over 60

Have you completed any other community leadership program? Yes No

Where:

Program Name:

Section 1: Employment

Employment History (most current first)	Title/Responsibilities	From	To	# employees supervised

1. Your current level of management is considered?
 Owner Executive Middle Lower Non-Management

2. Total number of employees in your current organization:

3. Which of the following categories best describes your industry?

- | | | |
|--|---|---|
| <input type="checkbox"/> Agriculture | <input type="checkbox"/> Retail Trade | <input type="checkbox"/> Education |
| <input type="checkbox"/> Utilities | <input type="checkbox"/> Information & Technology | <input type="checkbox"/> Government |
| <input type="checkbox"/> Construction | <input type="checkbox"/> Finance & Insurance | <input type="checkbox"/> Arts, Entertainment & Recreation |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Real Estate | <input type="checkbox"/> Accommodations & Food Services |
| <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Professional Services | <input type="checkbox"/> Health Care & Social Agencies |
| | | <input type="checkbox"/> Other _____ |

4. What do you consider your most significant career achievement to date? Why?

Section 2: Education

Name/ City of School/ Institution	Degree/Certificate	Dates	Major/ Field of Study

Section 3: Involvement, Organizations & Activities

Please list, **in order of importance to you**, community, civic, professional, religious, social, athletic, and/or other organizations of which you are or have been a member. (No more than five please.)

Organization	Approximate Dates of Membership		Position Held
	From	To	

6. How much time do you currently commit (monthly) to community, civic, professional, and other volunteer activities?

7. If you have previously not had time or the interest to be involved, what has changed enabling you to seek community involvement?

8. Are you interested in seeking key volunteer, public office, board, or other community leadership roles?

Please explain:

9. Please describe an accomplishment within these (listed above) activities that has contributed the most to your leadership learning:

Section 4: Awards and Honors

List Special Awards/Honors (business, professional, educational, civic, other)

Organization	Award

Section 5: St. Lucie County Perspective

10. One of the goals of Leadership St. Lucie is to build a countywide network of community leaders who can enhance their problem-solving and other leadership abilities through shared perspectives. Describe what you feel are the two most pressing issues facing St. Lucie County.

a.

b.

11. Pick two of the issues you described above to answer the following questions:

- If you were in charge of making actions or changes to these issues, what would you change and how would you change them?

Issue a:

Issue b:

- If you were the person in charge of making these changes, what would you do to effect those changes?

Issue a:

Issue b:

Section 6: Why Leadership St. Lucie?

12. Why should you be selected for Leadership St. Lucie?

13. Please provide additional information which could assist the selection committee in assessing your qualifications?

14. What are your expectations or objectives stemming from your participation in Leadership St. Lucie?

15. What do you envision as your role as a leader in the community moving forward?

Scholarship Assistance

There is a limited budget available for partial scholarships for participants in the Leadership St. Lucie Program. Anyone accepting a scholarship that does not complete the program will be required to reimburse the Chamber Foundation for the scholarship monies received.

If accepted, will you find it necessary to seek such assistance? Yes No

In 500 words or less, clearly explain why you should be awarded a partial tuition scholarship for Leadership St. Lucie and provide a letter of recommendation from your employer.

Employer Commitment

By signing below, I acknowledge that this applicant has company support, which includes the time required to participate in *all* sessions of the Leadership St. Lucie Program and Chamber Committee involvement in year two and that I am authorized to approve such application.

Employer/Supervisor Name:

Title:

Phone:

Email:

Signature:

Date:

Applicant Commitment

PLEASE READ CAREFULLY

- **Attendance requirements:**

- **Orientation and Ropes Attendance is Mandatory. No Exceptions.**
- One full day session per month, on the second Thursday of each month from January through November, 7:30 am to 5:00 pm. Participants will ride the Leadership Bus.
- Participation in a class project.

Note: Participants who miss more than two classes will not graduate. There are no exceptions.

Tuition for each participant is due upon acceptance. Tuition is nonrefundable after December 1st.

- I understand the goals and commitment of the Leadership St. Lucie Program and the attendance requirements.
- I understand that all statements made by participants and program speakers are confidential.
- I understand that I am making a commitment to serve on a St. Lucie County Chamber of Commerce Committee the year following my graduation.
- I understand that I will be responsible for assisting in the formulation of at least one session for the following year's leadership class.
- I understand that if, for any reason, I am not able to complete the above program requirements, I may be asked to withdraw from the program and no portion of the tuition will be refunded.
- I understand the information outlined above and have discussed the same with my employer.

Signature: _____ Date: _____

Return Application by Deadline to:

Leadership St. Lucie

2937 W Midway Road, Fort Pierce, FL 34981

Phone: 772-595-9999 * Fax: 772-595-9990 * TAranson@stluciechamber.org