LEADERSHIP AMARILLO & CANYON



Adult Program Application Please fill out the form and return to Lisa Blake at lisa@leadershipamarillo.org

First Name	_		
Last Name			
Company			Current Position and Responsibilities
Street Address / Suite			
City State	Zip	code	
Business Phone Number			
Email			
Current Involvement in the Community Please list relevant honors, offices held and activities; business or	сотти	ınity related. Incli	ude any prior work related experiences.
References Please list the name and phone number of two people	e who c	can attest to your l	leadership capabilities
What do you believe is most concerning in our community and	d why?		
Applicant Commitment: I understand that attendance is vital successful completion of Leadership Amarillo & Canyon and I and resources necessary to complete the program. No portion or refunded except by the approval of LAC Board of Directors.	will d		
Agreed			
Business/Organization Agreement: Applicants for the LAC program must have the support and corbusiness or organizations. The head of the applicant's organization of the organization's support of the applicant's participation	ion is r	necessary as an	soring
Company/Organization Approval			
Company Approval Representative/Full Name		Date	