



## 2023-2024 Program Application

*Program Sponsored by*

Mount Pleasant Area Chamber of Commerce  
Iowa State University Extension & Outreach – Henry County

**Henry County Leadership is a program designed to identify, cultivate and navigate future community leaders.**

Instructions: Please clearly **print** all information. The applicant and their employer must sign this application and return to the Mount Pleasant Area Chamber of Commerce no later than 5:00 PM on Friday, September 1, 2023. Class size is limited.

Tuition - \$600/person (additional cost include one meal and one night stay and one meal in Des Moines for Southeast Iowa Days)

### APPLICANT INFORMATION:

Name: \_\_\_\_\_  
*First Last (Informal Name You Use)*

Employer: \_\_\_\_\_ Title: \_\_\_\_\_

Employer Address, City, Zip: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Number of years you have lived/worked in the Henry County area: \_\_\_\_\_

Do you have any dietary or physical restrictions? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please explain: \_\_\_\_\_

### COMMUNITY INVOLVEMENT

Please list up to three civic, professional, business, religious, social, athletic or other community organizations of which you are or have been a member:

- 1.
- 2.
- 3.

### EDUCATIONAL BACKGROUND

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This application does not guarantee acceptance into the Henry County Leadership Program. Accepted applicants will be notified by September 15, 2023 with location information and payment instruction.

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Briefly state your reason for applying to the Henry County Leadership program:

**CANDIDATE COMMITMENT**

Participants are allowed one excused absence. Absenteeism will result in being removed from the program without graduation. Program tuition is non-refundable.

I understand the purpose of the Henry County Leadership program and will devote the time and energy necessary to complete all aspects of the program. My employer and I are willing to make this October to May program commitment.

**Candidate Signature:** \_\_\_\_\_

**Candidate Printed Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**EMPLOYER COMMITMENT (IF APPLICABLE)**

This candidate's application has the approval of this organization and the applicant has our full support which includes the time commitment required to participate in all aspects of the Henry County Leadership program.

**Employer Signature:** \_\_\_\_\_

**Employer Printed Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_