



Dear Leadership Development Academy Applicant:

Thank you for your interest in the Leadership Development Academy (LDA) of Rock County!

The LDA is designed to develop and enhance participants' leadership skills for long-term benefit to their workplace and community. The LDA seeks participants who possess:

- An interest in expanding their leadership skills to new heights;
- A desire to advance career opportunities within their organization;
- A strong interest in influencing change and having a positive impact on the future;
- An intention to seek public office, expand volunteer capacity within community organizations, or pursue board memberships;
- A commitment to develop Rock County's greatest potential by building a strong workforce and a community of leaders and;
- A desire to work with a diverse cross-section of business, education, community, and non-profit leaders.

Please use the following outline as you prepare your application. There are six parts that are required so please submit responses to each section, as incomplete applications will be eliminated. **Brevity and clarity are essential in considering the quality of each application.** Please submit your application by the deadline listed below. Thirty participants will be selected for this program year. If you are not selected, you will be placed on a waiting list.

You can submit your application in one of two ways:

1. Email your completed application form to [application@ldarock.com](mailto:application@ldarock.com)  
(You can access an electronic version on the LDA website [www.ldarock.com](http://www.ldarock.com))
2. Mail your completed application to:  
**Leadership Development Academy**  
**P.O. Box 1383**  
**Janesville, WI 53547-1383**

The timeline for the application/selection process is as follows:

- The application submission deadline is **Thursday, June 01, 2017 at 5 PM.**
- The LDA Class of 2017-18 will be notified no later than July 1, 2017.
- Orientation will take place on September 7, 2017. A Low & High Ropes Retreat is scheduled for Friday, September 8, 2017. These dates are subject to change; participants will be given ample notice of any schedule changes.
- Class sessions will begin the month of October 2017 and end in May 2018.

Please contact Linda Ross, Executive Director, at (608) 352-3328, if you have any questions about the program or the application process.

Again, we thank you for your interest in the Leadership Development Academy!



## **2017-18 LDA PROGRAM**

Sessions are a full day, once a month, for 9 months (with the exception of the first week in September which requires two days for orientation and retreat).

- Sessions are held on the second Friday of the month
- Sessions meet from 8:30 AM to 4:30 PM
- Program days include lunch and a tour
- Final small group project presentation

**Orientation/Program Start:** September 7 & 8, 2017

**Graduation/Program End:** May 11, 2018

**Submission/Payment Deadline:** Application due June 1 / Full payment due September 1, 2017\*

\*If full payment is not received by September 1, the next person on the waiting list will be given your spot.

**Tuition Fee:** \$1,200

**Curriculum:** Encompasses approximately 80 hours of programming, with the following breakdown:

- 1/3 Time - Leadership Training Opportunities
- 1/3 Time - Community Events/Issues/Tours
- 1/3 Time – Small Group Participation Activities

### **Program Topics (not in order as covered):**

- Fundraising
- Media relations
- Public sector leadership
- Networking skills
- Project management
- Public speaking
- Community Challenges
- FYU`7c`cfg`@YUXYfg\`d`5ggYgga Ybh
- Image & Volunteerism
- Introduction to marketing / `VfUbX]b[
- Economic development
- Civic Responsibilities
- 7f]g]g`7ca a i b]Wh]cb
- Problem solving / `XYV]g]cb`a U\_]b[

**Program Outcomes (Results):** Formal leadership training, community awareness, exposure and involvement with a final small group project (full project leadership from birth to lessons learned). Blackhawk Technical College will provide a Certificate of Continued Education Credits based upon education hours.

# APPLICATION FORM



**LEADERSHIP**  
**DEVELOPMENT ACADEMY**  
EMPOWER THE LEADER IN YOU

## **PART ONE - APPLICANT INFORMATION**

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FULL NAME \_\_\_\_\_  
First M.I. Last

HOME ADDRESS \_\_\_\_\_  
Street Address

\_\_\_\_\_ City State Zip Code

HOME PHONE \_\_\_\_\_ CELL PHONE \_\_\_\_\_

E-MAIL \_\_\_\_\_

NUMBER OF YEARS YOU HAVE LIVED OR WORKED IN ROCK COUNTY \_\_\_\_\_

## **PART TWO - EMPLOYMENT INFORMATION**

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PRESENT EMPLOYER \_\_\_\_\_

JOB TITLE \_\_\_\_\_

WORK ADDRESS \_\_\_\_\_  
Street Address

\_\_\_\_\_ City State Zip Code

WORK PHONE NUMBER \_\_\_\_\_

TOP THREE MAJOR WORK RESPONSIBILITIES

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

## **PART THREE – EMPLOYMENT AND LEADERSHIP HISTORY**

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Please describe positions you have held in the past five years, and any other workplace leadership opportunities you have held (task force member, committee chair, etc.):

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Please list three professional references and their contact information, including phone number & email address:

Reference #1 (immediate supervisor)

Reference #2

Reference #3

## **PART FOUR - COMMUNITY INVOLVMENT**

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Please list community, civic, religious, political, government, social, athletic, or other organizations of which you are or have been a member; any special awards or honors for activities here or in other communities.

## **PART FIVE – WHY BE A LEADER?**

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What do you hope to gain as a participant from Rock County's Leadership Development Academy?

In what ways do you hope to contribute your leadership ability/skills to the community over the next 5 years?



## **PART FIVE CONTINUED– WHY BE A LEADER?**

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Describe below how your participation in the LDA will assist you and/or your employer in your quest to advance professionally and within the community. Provide information concerning your future personal or career goals (i.e. advancement within your organization, participation in and leadership of community-based organizations, publically elected leadership positions, etc.) and list some of the areas in which you believe participation in a leadership program will help you improve.

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## **PART SIX- PARTICIPATION AGREEMENT**

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**In submitting this application, I agree that if selected as a LDA participant, I will:**

- Attend all sessions. (*The sessions are typically **the second Friday of every month**, however, the LDA reserves the right to change the class session dates based on venue, speakers, etc.*)
- Attend the **MANDATORY** leadership retreat at George Williams College/Outdoor Wisconsin Leadership School (OWLS) in Williams Bay, WI. (*Complete details will be provided upon selection.*)
- Participate in all projects.
- Complete all assignments.
- Be an active, positive, contributing member of the class. Participants are expected to consistently work in a collaborative manner and demonstrate willingness to work effectively with diverse personalities.
- Have access to a computer with Microsoft Word, Excel and PowerPoint, Internet access, and a personal email account.
- Be able to cover personal travel and meal costs not included in the program.
- Be available for a personal interview if requested.
  - During the application review process, you may be contacted for a personal interview. This brief 10-15 minute personal interview will be used in the selection process.
- Will be actively involved in the community after completing the LDA.
- Pay (either personally or through my organization) the non-refundable \$1000 participant tuition fee.
  - Tuition is due in full by September 1<sup>st</sup> of each class year.
  - Contact Linda Ross, LDA Executive Director to arrange a payment plan.
  - Limited financial assistance may be available. For more information regarding scholarship opportunities please review and complete the scholarship form available in this packet.
  - *\*Please Note: The amount of financial aid given is at the discretion of the LDA Board of Directors.*

Your application will be reviewed by the LDA's Selection & Recruitment Committee.

Blackhawk Technical College will provide a Certificate of Continued Education Credits based upon education hours.

Session Dates may change due to weather, holidays, and location availability. Participants will be given ample notice of any schedule changes.

***In submitting this application, I agree to the terms stated in "Part 6: Participation Agreement" of this application. If I cannot meet the above criteria, I understand that the LDA Board of Directors may evaluate and choose to terminate my participation.***

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

# SCHOLARSHIP APPLICATION FORM



**LEADERSHIP DEVELOPMENT ACADEMY**  
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Thank you for taking time to apply for a LDA Scholarship. To ensure we have all the information needed for evaluation, please complete all sections of the application below.

## Description of Scholarships:

- Scholarship amounts will range from 10-50% of the LDA tuition.
- The scholarships are financial need-based.
- The scholarships will be reviewed with the LDA application by the Selection & Recruitment Committee of the LDA Board of Directors.
- Individuals requesting a scholarship may be interviewed after the initial screening process.

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## 1. Applicant Information:

Full Name \_\_\_\_\_  
First M.I. Last

Address \_\_\_\_\_  
Street Address  
\_\_\_\_\_  
City State Zip Code

Phone \_\_\_\_\_ Email \_\_\_\_\_

## 2. Indicate which scholarship category best describes you in your current workplace:

I am applying as an employee of a non-profit organization.

\_\_\_\_\_  
Name of Non-Profit Organization

I am applying as an employee of a small business. (Defined as 25 or less employees)

\_\_\_\_\_  
Name of Small Business

I am applying as a student, retired individual, or as an individual.

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I certify that all the information on this form is true and complete to the best of my knowledge. If asked by any member of the LDA Board of Directors, I agree to provide documentation for the information given on this form. I realize that failure to comply with a request for future information may prevent me (the applicant) from receiving a scholarship.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date