



## 2022-2023 Enrollment Form

Please complete and return by Monday, August 8, 2022.

**Preferred enrollment status will be granted to the first 20 applications received.**

Applications may be mailed or emailed to the addresses below.

\***TWO** applicants per business

\***ONE** applicant per household

Leadership Independence 616 N. Penn. Ave. / P.O. Box 386 - Independence, KS 67301 <a href="mailto:chamber@indkschamber.org">chamber@indkschamber.org</a>
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Last Name	First Name	M.I.
Street Address		Mailing Address
City	State	Zip Code
Work Phone	Cell Phone	Email Address

Why are you interested in Leadership Independence?
What do you hope to learn from the experience?
What clubs, organizations, or areas of community service are you most interested in?
Describe your current and previous community involvement. Please include civic, church-related, governmental, and other voluntary capacities.

Independence Chamber of Commerce  
 Phone – 620.331.1890 / Fax – 620.331.1899

**Education History:**


**Employment History:**

Dates	Employer	Position/Responsibilities
Dates	Employer	Position/Responsibilities

**Schedule:**

*Leadership Independence is a cumulative program; each session builds on those previous. Therefore, attendance and participation at all sessions is required in order to graduate.*

Can you attend all sessions listed below? \_\_\_\_\_

**2022-2023 Class Schedule:** Please clear your schedule from 8:00 a.m. – 5:00 p.m. each of the session days, except Session 1. The September class is held from 4:00 p.m. – 8:15 p.m.

Session 1 – September 8, 2022  
 Session 2 – October 13, 2022  
 Session 3 – November 10, 2022  
 Session 4 – December 8, 2022

Session 5 – January 12, 2023  
 Session 6 – February 9, 2023  
 Session 7 – March 9, 2023  
 Session 8 – April 13, 2023

Graduation – April 2023  
Official Date TBA

**Employers:** The Leadership Independence program provides students with the opportunity to not only learn valuable leadership skills, but also experience the benefits of our community first-hand! **Attendance at all sessions is required for graduation.**

*By signing below, you acknowledge your support of the individual participating in this year’s Leadership Independence program.*

Employer Signature \_\_\_\_\_ Date \_\_\_\_\_

**Fees:**

There is a fee of \$300 to cover all class materials and session costs. Please check with your employer as many offer partial or full tuition assistance.

*Installment payment plan and/or limited scholarship assistance are available if needed from the Leadership Independence program. Please indicate your interest in either of these:*

Installment Plan Yes  No                       Scholarship Assistance Yes  No

Do you have dietary restrictions? Yes  No

If yes, please describe: \_\_\_\_\_

Several class sessions involve walking, touring through businesses, and traveling with the class to various destinations around Independence. Do you need any physical accommodations to help you be successful in completing this class? Yes  No

If yes, please let us know what you need below, or call the Chamber office at 331-1890.

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Please answer the following question, using approximately 500 words. **Dream big**, describe something actionable, and please be specific.

We know Independence is a great place to live, work, and play. We also know that every community has ways in which it can improve. If you could wave a magic wand, what one thing would you change or establish that would enhance the quality of life in Independence or in some way benefit our community? What solution or creative idea do you have for making your dream a reality?

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

**Date** \_\_\_\_\_

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