

NAME: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Company Name: _____

Title/Position: _____

What are you hoping to gain from the Greater Than Leadership Program?

What two primary strengths do you possess? Briefly explain how they have helped you or could help you in the future to develop as a leader.

1.

2.

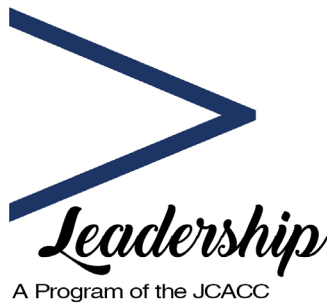
Personal Commitment

- 1. I agree to attend the two-day, retreat and all scheduled class sessions. _____
(initial)
- 2. I agree to give my full attention and will not be available for work issues during class sessions. _____
(initial)
- 3. I agree to spend the necessary time outside the scheduled retreat and class sessions preparing my personal growth plan & completing any required assignments (approx. 1-3 hours a month). _____
(initial)
- 4. I agree to attend two thirty minute Individual Coaching Sessions (1 at the beginning of the class and 1 with the growth plan). _____
(initial)

Dates

- Thursday & Friday, **April 25th & 26th** (Thursday - 12:30 pm - 5pm, Friday - 9 am - 4 pm)
- Friday, **May 31st** (8 am - 12 pm)
- Friday, **July 12th** (8 am - 12 pm)
- Friday, **August 9th** (8 am - 12 pm)
- Friday, **September 13th** (8 am - 12 pm)
- Tuesday, **October 22nd** (1 pm - 5 pm) - Graduation

Applications due to [Jordan@jcacc.org](mailto:jordan@jcacc.org) by 3-29-24



Fees

If applicant is selected, the cost for the program will be \$625.

- My company is a STEP OF COURAGE and has a 50% scholarship (remaining cost will be \$325)
- My company is a STEP OF STRENGTH and has a full scholarship

Please indicate how much of the fee will be paid by applicant and how much will be paid by the employer.

Employer: \$_____ (Employer will be invoiced upon applicants acceptance into the program.)

Applicant: \$_____ (Applicant to pay upon acceptance into the program and before April 15th, 2023.)

- If you work for a non-profit or a small business and would like to know if there are any donated scholarships available please check this box and we will contact you or email Jordan@jcacc.org

Breakfast

In the past we have provided breakfast for each session. To help us minimize waste please indicate your preferences below.

- I prefer a hot breakfast
- I prefer a continental
- I won't eat breakfast and would prefer snack items
- I will drink coffee if it is provided

Company Commitment

I agree to allow the applicant to attend the two-day retreat and all scheduled class sessions.

Company Name: _____

Supervisors Name: _____

Supervisors Signature: _____

Applications due to Jordan@jcacc.org by 3-29-24