



# LEADERSHIP NORTHWEST FLORIDA APPLICATION

## PERSONAL INFORMATION:

Full Name:

Preferred Name:

Business Phone

Cell Phone Number:

Preferred Mailing Address:

E-Mail Address:

Polo Shirt Size:

Food Allergies and/or any Special Accommodations:

## EMPLOYER INFORMATION:

Current Employer:

Position:

Years/Months in Position:

Business Mailing Address:

Are you an investor of Florida's Great Northwest?

- If not, would you like more information about becoming an investor?

Did you participate in the informational webinar for LNWFL?

**Read and answer the following questions. We recommend using a separate document for additional space.**

**COMMUNITY INVOLVEMENT:**

Please list any leadership positions held, special awards received, and/or community, civic, political, or religious organizations in which you are involved:

**SHORT ESSAY QUESTIONS:**

**1) LEADERSHIP DEVELOPMENT**

What are your personal/professional goals that you hope to accomplish by participating in the Leadership Northwest Florida program?

**2) COMMUNITY ISSUES**

A. Tell us what you believe is a specific issue that must be addressed to improve the quality of life in Northwest Florida:

B. Describe what you would do to address and resolve this issue to build a better community and region:

**3) CONTRIBUTION TO THE LEADERSHIP NORTHWEST FLORIDA CLASS**

What unique achievements, qualities, or characteristics would you bring to the class? Please describe strengths, experiences, and perspectives that would make you a “unique contributor”:

**4) LEADERSHIP IN COLLABORATION**

What benefits to the community do you feel are likely to result from your participation in the Leadership Northwest Florida program?

## EMPLOYER COMMITMENT

Please have this letter placed on company letterhead and submitted by your leadership:

{APPLICANT'S NAME} has the approval and full support of {COMPANY NAME} and {SUPERVISOR NAME} for participation in Leadership Northwest Florida. We understand the time required to fully participate in the program and we are committed to the resources this program will require.

SUPERVISOR SIGNATURE & DATE

---

## PERSONAL COMMITMENT

Leadership Northwest Florida is designed to be an educational program focused on regional collaboration through community, content, and connection. The schedule is intense as a seven-session program presented across the region. Participation is imperative to receive the full value of the time and money invested in the program. Program participants are expected to be actively engaged and attend all sessions. Any absences, both expected or emergency, must be discussed promptly between the participant, FGNW staff, and the participant's employer.

I understand the commitment in time and other resources to participating in Leadership Northwest Florida. I am committed to growing as an engaged and empowered leader in Northwest Florida through this program and dedicated to the long-term betterment of this region.

Applicant Signature:

---

## TUITION AND PAYMENT POLICY

Tuition to participate in [Leadership Northwest Florida](#) is:

**(select one)**

- FGNW Investors: \$2,250
- Non-FGNW Investors: \$3,000
- Tuition covers registration fees, activities, meeting materials, space rentals, meals, opening retreat, graduation, and transportation services when applicable. Tuition does not include travel across the region or overnight accommodations. Payment via check or ACH is due within 15 days of acceptance into the program. If tuition is not received by this date, you may be dropped from the class.

