

## LEAP EMPLOYER/SPONSOR APPLICATION

*Please complete the following application for the employee that you are sponsoring to attend Leadership Pioneer Valley's LEAP Program. Please recognize that there are both time and financial commitments for participation in the program. You may submit your answers here, on a separate page or online at [www.leadershivpv.org](http://www.leadershivpv.org).*

Name: \_\_\_\_\_

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

Organization/Company: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Name of Participant Sponsoring: \_\_\_\_\_

- 1) Why are you sponsoring this person to participate in Leadership Pioneer Valley? What does your company/organization hope to gain?
  
  
  
  
  
  
  
  
  
  
- 2) What leadership skills do they already exhibit? Cite any examples of leadership.
  
  
  
  
  
  
  
  
  
  
- 3) Please cite any examples of their emotional maturity and ability to regulate themselves under unfamiliar or stressful situations.

## COMMITMENTS FOR PARTICIPATION

*This form must be filled out completely, signed by you, and attached to the sponsor application to warrant consideration.*

### **Financial Commitment**

Tuition is **\$3,950** – Tuition covers all class year expenses including: the overnight retreat, meals, program training and materials, trainers, transportation, commencement ceremony, and graduation reception. The above tuition includes a *suggested personal tuition of \$350* paid by each individual participant to ensure their personal engagement. Employer tuition assistance is available to non-profits, small businesses, and public sector employees. Flexible payment plans are negotiable upon request for both employers and applicants. For information on financial assistance refer to the Financial Assistance Request form which must be submitted with this application.

Employer Tuition Portion: \$ \_\_\_\_\_

Applicant Tuition Portion: \$ \_\_\_\_\_

Financial Assistance Requested: \$ \_\_\_\_\_ (be sure to submit a completed tuition assistance application)

### **Total Tuition: \$3,950**

Full participation by each participant of LEAP is critical.

It is vital that participants and employers understand and honor these commitments. If your organization or employee are unable to commit to this schedule, please do not apply at this time. Applications without your signature will not be accepted.

*I, as an employer, understand and agree to these commitments.*

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

\_\_\_\_\_  
Employer Name

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name of Applicant Sponsoring