# LEADERSHIP HUDSON

#### **CLASS OF 2024**

LEADERSHIP HUDSON is a nine-month program that introduces participants to the City of Hudson, its businesses and community leaders with the goal that at the program conclusion, participants will serve Hudson in future leadership positions. In addition to valuable self development of leadership skills, the program provides the opportunity for the class to develop its own unique project that will benefit the wider Hudson community.

#### **INSTRUCTIONS**

Please complete each section. Limit answers to the space available. Application must be emailed to James Hill at <a href="mailto:ksojph@gmail.com">ksojph@gmail.com</a> and received no later than July 15, 2024.

### **SELECTION CRITERIA**

Participants will be chosen by the LEADERSHIP HUDSON Board based upon the information completed on this application. The Board will be seeking representation from a cross-section of the community. Participants should display experience (past/present) in business, education, the arts, religion, government or community-based involvement.

Applicants who are sponsored must have the full support of the organization or corporation they represent.

#### I. PERSONAL INFORMATION

Last Name		First	Pre	fered Name_	
Home Address Personal Email Ad	Address		City	State Zi	p
Home Phone		Cell Phone	\	Work Phone _	
City of Residence			City of Work	ζ	
Present Employer			Company Co	ontact	
Phone			E-mail (Compan	y Contact)	
Business Address	Address		O:h.	Ctata 7	_
Hobbies / Interests	Address			State Zi	
Any dietary requirements					

## II. EDUCATION

Begin with high schoo	l, college(s), ac	dvanced degrees and	or specialized	training.
A. Name and location of school		Dates (from/to)	Degree	Major
B. Special awards, offi	ices, recognitio	ns and significant cor	ntinuing educa	tion:
	III. EMI	PLOYMENT		
Present employer				
Type of organization _				
Title				
A. Briefly describe you	ur responsibiliti	es in your employme	nt.	
B. List previous emplo	yment in revers	se chronological orde	r (include milit	ary duty)
Employer	Title/Resp	oonsibility	Fron	n To
C. What do you consid	der your highes	t career achievement	to date?	
D. Business/Professio	nal Affiliations	(not including civic organizations	s, public office or polit	ical activities
Name of group	Positions	held or assignments	Fron	n To

## IV. COMMUNITY INVOLVEMENT

other activities. Indicate your major role in the organization at this time.  Organization
Assignment/Position
Describe Responsibilities
Organization
Assignment/Position
Describe Responsibilities
Organization
Assignment/Position
Describe Responsibilities
B. What do you consider your most important accomplishments in one of the above organizations? Why?
C. What kind of volunteer activities would you like to become active with in the future, keeping in mind that more effective community service is the outcome of participation in LEADERSHIP HUDSON?
D. Has there been a change in personal or professional conditions that now allow you to be more involved in the community?

#### V. GENERAL INFORMATION

One of the goals of LEADERSHIP HUDSON is to develop individual leadership skills to server future community needs, to give future leaders the means to share their talents and ideas to better the community. Please take a moment to answer the following questions:

A. 1. What specific skills/knowledge do you hope to gain from your participation in LEADERSHIP HUDSON and where is your interest of impact?

B. 2. How did you learn about Leadership Hudson and its impact in the community?

#### VI. REFERENCES

Applicants must have two recommendations from personal, professional or civic contacts. Please have your references email their recommendation directly to James Hill at <a href="mailto:ksojph@gmail.com">ksojph@gmail.com</a>.

	Reference	Email	Phone Number
1			
2.			

#### VII. PROGRAM REQUIREMENTS & COMMITMENT

The LEADERSHIP HUDSON Program expectations consists of ten sessions both inperson (Typically 8:00 a.m. to 4:00 p.m.) and possibly virtual, over the course of nine months. Participants are also required to complete a class service project to benefit the community. Tuition for the 2024 program is set at \$695. Ability to pay tuition in full should not be a barrier to those applicants whose tuition is not paid by a sponsoring organization or employer. Applicants who are self-paid may request partial tuition remission in the optional attachment (pg. 5).

Participants are expected to fully dedicate their time and focus to Leadership Hudson during the class sessions. Participants missing multiple sessions may be asked to withdraw in which case tuition will not be refunded. I understand the above commitment.

Signature of applicant

#### VIII. AGREEMENT OF ORGANIZATION

This application has the approval of our organization and has our full support which includes the time required to participate in the program.

Title Signature Organization E-mail

APPLICATION CAN BE EMAILED TO: ksojph@gmail.com ALL APPLICANTS WILL BE NOTIFIED OF ACCEPTANCE NO LATER THAN August 15, 2024

# **LEADERSHIP HUDSON**

# Request for partial tuition remission (optional) CLASS OF 2024

This form to be completed by applicants who are self-funded and requesting partial tuition remission. All requests will be considered by the Leadership Hudson board. Approved tuition remission applicants will receive uniform awards. Payment plans available upon requests. Applicants will be advised of the amount of tuition remission offered in their acceptance letter and will have the option to accept or withdraw their application.

As an applicant for the Leadership Hudson Cl responsible for paying the tuition for the progr remission. Thank you for your consideration.	am and I request partial tuition
(Signature)	(Date)