



APPLICATION

Instructions

- Application must be completed in full, be signed by candidate, candidate's employer, and/or financial sponsor (or candidate himself/herself). It must include a letter of recommendation and a \$100 **nonrefundable deposit**.
 - **Please use Adobe Fill & Sign to complete all fields.** Please **do not** handwrite applications, they will be sent back to you.
 - **Application, letter of recommendation and deposit must be received by 3 p.m., Friday, May 7, 2021** to be considered for the Class of 2022.
 - **Incomplete or late applications will not be considered.**
 - For deposit, make checks payable to: *Capital Region Chamber Foundation*, or pay by credit card on the Chamber website.
 - Please mail or hand-deliver application, letter of recommendation and deposit to:
Capital Region Chamber, C/O Leadership Tech Valley, 5 Computer Drive South, Albany, NY 12205.
 - For questions regarding the application contact Brandi Landy at (518) 431-1414 or blandy@capitalregionchamber.com.
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Personal Information

Name _____

Last

First

Middle Initial

Preferred Pronouns _____

Company/Organization _____

Your Position/Title _____

Business Street Address _____

Business City, State, Zip _____

Business Phone _____

E-Mail Address (Preferred) _____

Home Street Address _____

Home City, State, Zip _____

Home or Cell Phone _____ Number of Years in the Region _____

How did you learn about Leadership Tech Valley? _____

Why are you interested in participating? _____

What do you hope to gain? _____

Employment Information

Briefly describe your current job responsibilities. _____

List previous positions held with your present employer and other employment in reverse chronological order. Attach additional sheet, if necessary.

Employer	Title/Responsibility	From	To
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

What do you consider your most significant contribution or achievement related to work? _____

Community Activity

If you are not currently involved in community service activities, volunteerism or board service, which types of community service organizations would you like to learn about, and why? _____

If you are involved in community service activities, please describe your level of community involvement and why it is important to you. _____

Please list, **in order of importance to you**, up to three other civic, professional or community organizations of which you are a present or past member. Please note any leadership positions held.

Organization	Title/Responsibility	From	To

General Information

Leadership Tech Valley is a transformational program for existing and emerging regional leaders. This program provides the foundation for a lifelong commitment to leadership and community engagement by creating awareness of key issues and opportunities that affect the Capital Region. Please explain why you should be considered for this program.

Please limit your response to 250 words.

Letter of Recommendation Requirement

- A letter of recommendation is required as part of the application process.
- Please list below one (1) professional reference.
- Ask your reference to submit to you a recommendation letter limited to two pages that addresses:
 - The relationship/affiliation of the person to you
 - Your community activities and/or professional accomplishments
 - Your leadership capabilities
 - Why you would be an excellent candidate for the program

Name of Reference: _____ Title: _____

Organization: _____ Relationship: _____

Additional Information:

- Applicants will be interviewed by the program Co-chairs and Chamber staff between May 17 and June 11, 2021.
- Participants will be selected based on leadership, community involvement or desire to get involved, and other relevant factors.
- The Capital Region Chamber recognizes the value to learning and growth that comes with having a diverse and inclusive class. We strive to increase the diversity of participants including age, race, color, national and ethnic origin, religion, gender, gender identity and/or expression, sexual orientation, military or veteran status, marital status, disability, socio-economic status and work experience. Our goal is to create a program that is representative of the diversity in our region, and to co-create with each class an environment that is equitable, respectful and appreciative of difference.
- All applicants will be notified by **July 9** of their acceptance status. **For more information regarding Leadership Tech Valley and the application process, contact Brandi Landy at (518) 431-1414 | blandy@capitalregionchamber.com**

Commitment

PARTICIPATION AGREEMENT / ATTENDANCE: Full attendance at all eight full-day sessions, (one Friday a month from October – May), is **required**. Two emergency absences will be allowed. Attendance at the entire two-day, opening retreat and full day closing session are **MANDATORY** for participation in the 2021 class. The mandatory two-day retreat will be held in September 2021. A class project and an experiential learning component outside of the structured program are required.

TUITION. Full tuition for Chamber Members is \$2,780; \$3,180 for non-Chamber Members. There is a discounted rate for small community based non-profit organizations that are Chamber Members, \$2,380. **A \$100 nonrefundable deposit is required with the application**, which, if accepted, will be applied toward tuition. The remaining balance is to be paid by the employer, a financial sponsor, or by the participant himself/herself. Tuition is non-refundable. Candidates are expected to secure their own financial sponsors. Tuition must be paid in full by **Friday, August 6, 2021**.

SCHOLARSHIPS: Financial assistance may be available on a limited basis. They are based on need, the number of requests received, and the amount of funds available. If you wish to apply for tuition assistance, please state the amount requested (\$_____) and attach a single sheet detailing your reason for the request.

Signatures

CANDIDATE: I understand the goals and commitments of Leadership Tech Valley. If selected, I am willing to devote the time necessary to be a contributing member of the class. I understand that I am personally responsible for any tuition not paid by my employer, financial sponsor or scholarship assistance. I further understand that if I fail to meet these obligations, I will be asked to withdraw from the program.

Candidate Signature _____

Date: _____

EMPLOYER COMMITMENT:

Check one box:

- ☐ I agree to allow my employee, if accepted, to devote the time necessary to be an active member of the Leadership Tech Valley class and will financially sponsor them.
- ☐ I agree to allow my employee, if accepted, to devote the time necessary to be an active member of the Leadership Tech Valley class. The employee will be responsible for his/her own tuition.
- ☐ I agree, if accepted, to devote the time necessary to be an active member of the Leadership Tech Valley class. I am self-employed and will be responsible for tuition.

Check your company membership status:

- ☐ Capital Region Chamber Member ☐ Non-Chamber Member

FINANCIAL AGREEMENT:

Full tuition is dependent upon membership status - Chamber Member \$2,780; Non-Chamber Members \$3,180 or the discounted rate for *small* community based Non-Profit organizations that are Chamber Members - \$2,380.

I agree to pay \$_____ for Leadership Tech Valley tuition for the above applicant if he or she is accepted.

I understand that tuition is due by Friday, August 6, 2021 and is non-refundable.

Employer Signature _____

Date: _____

Print Name, Title, Organization _____

Send your completed application with reference letter and **\$100 nonrefundable deposit** to Capital Region Chamber, C/O Leadership Tech Valley, 5 Computer Drive South, Albany, NY 12205; **the application must be received by Friday, May 7, 2021 by 5 p.m. MAKE CHECKS PAYABLE TO: Capital Region Chamber Foundation**