



PEARLAND
Leadership Foundation
EST. 2020



LEADERSHIP PEARLAND APPLICATION

Submit your application to – LeadershipPearland@pearlandchamber.org

NAME: _____

PREFERRED NAME: _____

EMPLOYMENT INFORMATION

EMPLOYER: _____

POSITION: _____

ADDRESS: _____

PHONE: _____ FAX: _____

EMAIL: _____

PERSONAL INFORMATION

ADDRESS: _____

PHONE: _____ FAX: _____

EMAIL: _____

COMMUNICATION PREFERENCE

WORK EMAIL PERSONAL EMAIL

Applications are due by August 11, 2023 at 5PM. LeadershipPearland@pearlandchamber.org

PROGRAM AWARENESS & PERSONAL GROWTH

How did you hear about Leadership Pearland?

What skills do you hope to gain from Leadership Pearland?

SUPPORTING DOCUMENTS

Please include the following supporting documents with your application:

1. CURRENT RESUME
2. PARTICIPATION CONSENT FORM

I have reviewed the program schedule and cleared my calendar to participate the Leadership Pearland Program. I commit to attending the opening retreat, all the regular sessions, Leadership Day in Austin, additional events as needed and the graduation celebration. If applicable, I have my employer's support as indicated below and we both have reviewed the Leadership Pearland expectations and class schedule. I will devote the time and resources necessary to complete the program in its entirety. I understand that missing more than 12 hours, for whatever reason, I may be asked to withdraw from the Leadership Pearland Class. I agree that the \$1500 payment is a **non-refundable** tuition cost for the Program.

Applicant Signature: _____ Date: _____

Employer Signature: _____ Date: _____

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LEADERSHIP PEARLAND TRANSPORT LIABILITY RELEASE FORM

I, _____, am voluntarily riding to and from sessions of Leadership Pearland, sometimes in personal vehicles, and at other times in vehicles or buses, either rented or provided on a pro bono basis to benefit the Leadership Pearland program and the Pearland Chamber of Commerce, as well as benefiting me as a member of the Leadership Pearland program.

I realize that travel in these vehicles is a risk, just as any travel in any vehicle is a risk when I am driving or anyone else is driving, and that road conditions, weather conditions and the actions of other drivers will influence the safety conditions of travel.

I hereby release the drivers, providers of the vehicles, whether owned or rented/leased, all participants in Leadership Pearland and their employers; all representatives of Leadership Pearland, the Pearland Leadership Foundation, and the Pearland Chamber of Commerce and their employees; from any liability from any injuries that may be associated with driving to and from Leadership Pearland activities.

Signature: _____

Printed name: _____

Date: _____



Participant Profile Consent Form

Select from the following options:

___ I hereby grant full permission to Leadership Pearland and the Pearland Chamber of Commerce to use my photo and profile information from the Leadership Pearland application in any publication or advertising materials (printed or electronic). This consent also serves to waive all rights of privacy or compensation which I may have in connection with the use of my photograph or profile information.

___ Please do not use my photograph in any publication or advertising materials.

___ Please do not use my profile information from the Leadership Pearland application in any publication or advertising materials.

Name

Business/Organization

Address

City State Zip

Signature Date

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