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**ICA Leadership Academy**

**Participant Application**

Please thoroughly complete the full application.

Applying does not guarantee a spot in the class. Selection of the Leadership Academy class involves careful and thoughtful consideration and scoring by a review committee.

**Applicant Information**

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

Phone Number & Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Company: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Have you previously applied to participate in the ICA Leadership Academy? \_\_\_\_ Yes \_\_\_\_ No**

**Why do you want to participate in the ICA Leadership Academy and what do you hope to learn through participation in the Academy?**

**How would you describe leadership?**

**Briefly describe your current work responsibilities.**

**Please briefly describe any civic, charitable, business, or professional activities you are involved with.**

**Please list any special accommodations needed (dietary or otherwise).**

**Program Dates** (tentatively planning for all classes to be held in the Des Moines metro area)

* October 13-14, 2020 (afternoon of October 13th and morning of October 14th)
* November 16, 2020
* December 8, 2020
* January 12-13, 2021 – in conjunction with the Executive Pathways Conference
* February 3, 2021 – in conjunction with the ICA Board Meeting
* March 28, 2021 – Evening – Graduation dinner
* March 29, 2021 – Participants will be recognized during the Annual Meeting of Members at the ICA Annual Meeting & Expo

**Participant Expectations**

* Attend and actively participate in ALL scheduled sessions. Emergency situations will be handled on a case-by-case basis.
* Complete any homework assignments given to the class. At this point, we don’t anticipate this being a large time commitment.
* Participate in at least one ICA committee meeting/conference call during the course. Most committee meetings are held by conference call and are generally one hour in length.

ICA places a high priority on full participation. All applicants should consider personal and professional calendars and make the necessary adjustment to accommodate the program schedule.

By signing and submitting this application, I acknowledge receipt of and understand the above participant expectations as it relates to the ICA Leadership Academy. I also understand that, if I am accepted into the ICA Leadership Academy, payment of the registration fee is due by September 20, 2020. Refunds will not be issued to participants who fail to meet the expectations of the program or who leave the program at any point.

Further, I understand the possibility exists that the Leadership Academy may need to be postponed due to COVID. In that case, the selected participants would be forwarded to the 2021-2022 class, refunds will be issued, and ICA will communicate directly with each participant individually.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant Signature Date

**ICA Leadership Academy - Employer Support Commitment**

**Employer Information**

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

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

Phone Number & Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please indicate your goals for your employee who is participating in the ICA Leadership Academy.**

**Employer Support**

I affirm the application of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to the ICA Leadership Academy. I acknowledge receipt of and understand the above participant expectations. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ has my support to fully participate in the ICA Leadership Academy. I also understand that, if my employee is accepted into the ICA Leadership Academy, payment of the registration fee is due by September 20, 2020. Refunds will not be issued to participants who fail to meet the expectations of the program or who leave the program at any point.

Further, I understand the possibility exists that the Leadership Academy may need to be postponed due to COVID. In that case, the selected participants would be forwarded to the 2021-2022 class, refunds will be issued, and ICA will communicate directly with each participant individually.

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Signature Date