

Dear Student:

Thank you for your interest in participating in FORERUNNERS. You MUST be a current junior to apply for the program. Attached is the application, which must be completed in its entirety and received, along with a \$125.00 participation fee and a 4 x 6 picture of applicant, no later than December 6th, 2022 at 4:00 p.m. Please make checks payable to The Chamber of Commerce. If you are not selected for the program, the fee will be returned to you.

The interviews will be held in February 2023. If you are selected for an interview, you will be emailed by January 10th. At that time, you can call or email to schedule your interview. The interviews will be conducted between 2:00 & 5:00 p.m. in 20-minute intervals and all interviews MUST BE in person. We will not call you to schedule your interview, nor will we allow you to schedule an interview after the deadline. If you call and I am not available, please leave your name, number, school and your preference for an interview date/time and I will return your call. You can e-mail me at alicia@westalabamachamber.com or call me at 205-391-0561.

The class will include students from the public and private high schools of Tuscaloosa County. If you are selected and then change schools, you must notify me immediately. Make sure your application is legible and complete. When choosing your teachers for references make sure they know the importance of the deadline. Acceptance notifications will be sent by email at the beginning of March.

FORERUNNERS 2023 will be June 5th – June 8th from 8:00 am – 5:00 pm at various locations within the community. Transportation to the various locations is the responsibility of the participant. You will also be required to have 4 volunteer hours completed at a participating local non-profit by Friday, May 12th 2023. A list of non-profits and a completion form will be provided upon acceptance into the program.

The Chamber is located at 2222 9th Street Tuscaloosa, AL 35401. If you are mailing your application, please use correct postage.

Again, thank you for your interest in FORERUNNERS, and we look forward to receiving your application.

Sincerely,

Alicia Gregory Alicia Gregory

Director of Membership Engagement alicia@westalabamachamber.com

205-391-0561



<u>APPLICATION</u> A Leadership Program Coordinated by The Chamber of Commerce of West Alabama

| <u>PERSONAL</u> | INFORMATION | <u>N</u> : | | |
|-----------------|--------------------|---------------------------|---|------------------------------|
| First: | | Middle: | Last: | |
| Name you pr | efer to be called: | | Home/Cell Phone | : |
| Gender: | Race: | Birthdate: | Birthplace: | |
| Home Addre | ess: | | Ci | ty: |
| Zip: | E-Mail A | ddress: | | |
| SCHOOL IN | FORMATION: | | | |
| Name of Hig | h School: | | | |
| Grade you ai | re currently enrol | lled in: | | |
| Please list in | | | folunteer, Religious, Athleting the last two years. | ic or other Activities or |
| <u>ORGANIZA</u> | TION/ACTIVIT | <u>Y</u> | YEAR | POSITION HELD |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| How much ti | me do you comm | it to these activities ea | ach month? | |
| What do you | consider your m | ost important achieve | ement so far? | |
| | | | | |
| List up to the | - | s, honors or recogniti | ons for academic, school or | community related activities |
| | | | | |
| | | | | |
| Main area of | interest in studie | s: | | |
| WORK EXP | | | | |
| | | nce, paid or volunteer | , and briefly tell what it in | volved: |
| | | | | |
| | | | | |

GENERAL INFORMATION (Use additional sheets if necessary)

| A. | Why do you want to participate in FORERUNNERS? |
|----|--|
| | |
| | |
| | |
| В. | What do you feel are the most significant problems facing Tuscaloosa County? (limit to three) |
| | 1 |
| | 2 |
| C. | 3 |
| | |
| | |
| D. | What are the most notable opportunities which you believe the Tuscaloosa community has to offer? (limit to three) |
| | 1 |
| | 2 |
| | 3 |
| Ε. | What are two important issues facing teenagers today? |
| | 1 |
| | 2 |
| F. | What are your long range goals; what role do you see yourself in seven years from now? (whether school, business, politics, community) |
| | |
| | |
| | |
| | |
| G. | What do you think are the most important characteristics of a leader? |
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| | |
| | |

REFERENCES

Please give a reference form to two (2) of your <u>high school teachers</u>. You may include teachers from your previous (freshman or sophomore) year. Other references will NOT be accepted (youth ministers, elementary school teachers, employers, family friends, etc.)

| 1. Name of first reference: | |
|---|--|
| Subject: | Telephone #: |
| 2. Name of second reference: | |
| Subject: | Telephone #: |
| INDIVIDUALS ARE VERY AWARE OF THE DEADL | ember 6 th AT 4:00 pm. PLEASE MAKE SURE THE ABOVE INE. YOUR REFERENCES CAN BE MAILED, EMAILED WILL NOT BE ACCEPTED AFTER THE DEADLINE FOR |
| the program and to complete at least four (4) volumes (an approved list will be provided). The volunteer between the complete at least four (4) volunteer between the complete at least | icipant is required to commit to attend the entire length of attern hours at a participating local non-profit organization hours must be completed in the time frame of January 1 – t be submitted to alicia@westalabamachamber.com by |
| I agree with the attendance policy and commitmen | t. |
| Student Signature | |
| As a parent or guardian of the above applicant, we FORERUNNERS. | approve of his/her participation and commitment to |
| Parent/Guardian Signature | |
| SCHOOL COMMITMENT The applicant has approval from this school to par | rticipate in FORERUNNERS. |
| Verify B Average (3.0/4.0 GPA) | |
| Authorized Signature, <u>Principal</u> (<u>must be school</u> p | principal, please print and sign) Date |
| Principal's Comments: | |
| Application and fee should be mailed to: Chamber of Commerce of West Alabama | Please make check payable to: Chamber of Commerce of West Alabama |

P.O. Box 20410

Tuscaloosa, AL 35402

*There are limited scholarships available. If financial assistance is needed, please contact me directly.



REFERENCE FORM Please print. Do not type.

| O THE REFERENCE: he student above is an appeight to the statements man prepare such an assessm | ade by references | of the applicant. | The committee | | |
|--|--------------------|---------------------|------------------|------------------|------------|
| his form must be received | | | | | on will be |
| nsidered incomplete with icia@westalabamachamb | | eturn it to the app | licant or email | it to | |
| our Name: | | | | | |
| osition/Title: | | | | | |
| chool/Organization: | | | | | |
| For how long and in wha | | | | | |
| Tot now long and in wha | t capacity have y | ou known the app | лісант. <u> </u> | | |
| Please use the scale below | u to company the | annlicant with at | han high sahaal | conhomoros vou k | |
| riease use the scale below | v to compare the | аррисант мин оп | ner mgn school | sopnomores you i | iave Kilow |
| Character | Exceptional | Excellent | Good | Average | Poor |
| Dependability | Exceptional | Excellent | Good | Average | Poor |
| Leadership potential | Exceptional | Excellent | Good | Average | Poo |
| Initiative | Exceptional | Excellent | Good | Average | Poo |
| Teamwork | Exceptional | Excellent | Good | Average | Poor |
| Maturity | Exceptional | Excellent | Good | Average | Poo |
| Maturity | | | | | |
| Oral communication | Exceptional | Excellent | Good | Average | Poor |
| Persistence & Drive | Exceptional | Excellent | Good | Average | Poo |
| Community interest | Exceptional | Excellent | Good | Average | Poo |
| Ability to explore problems | Exceptional | Excellent | Good | Average | Poo |
| | | | | | Ш |
| | | | | | |
| What do you consider the | e applicant's prii | mary talents or str | engths? | | |
| | | | | | |



REFERENCE FORM Please print. Do not type.

| First | Last _ | | | | |
|---|---------------------|---------------------------------|----------------|------------------|--------|
| TO THE REFERENCE: The student above is an applicant to the statements made by | | | | | |
| weight to the statements made by references of the applicant. The committee is aware of the time necessary to prepare such an assessment and gratefully acknowledges your help. | | | | | |
| This form must be received by no | later than Decemb | er 6 th . 2022 at 4: | 00 p.m. Stude | nt application w | ill be |
| considered incomplete without it. | You can return it t | | | | 20 0 |
| alicia@westalabamachamber.com | | | | | |
| | | | | | |
| Your Name: | | | | | |
| Position/Title: | | | | | |
| School/Organization: | | | | | - |
| 1. For how long and in what capac | ity have you know | n the applicant? | | | |
| | | | | | |
| 2. Please use the scale below to con | npare the applican | t with other higl | h school sopho | mores you have l | known. |
| | | | | | |
| Character 1 | Exceptional | Excellent | Good | Average | Poor |
| | | | | | |
| Dependability | Exceptional | Excellent | Good | Average | Poor |
| Leadership potential | Exceptional | Excellent | Good | Average | Poor |
| Initiative | Exceptional | Excellent | Good | Average | Poor |
| Teamwork | Exceptional | Excellent | Good | Average | Poor |
| Maturity Maturity | Exceptional | Excellent | □ Good | Average | Poor |
| Ougl communication | Exceptional | Excellent | ☐ Good | Average | Poor |
| Oral communication | L'Acceptional | Lacement | | | |
| Persistence & Drive | Exceptional | Excellent | Good | Average | Poor |
| Community interest | Exceptional | Excellent | Good | Average | Poor |
| Ability to explore problems | Exceptional | Excellent | Good | Average | Poor |
| | _ | | - | | ш |
| 3. What do you consider the applic | cant's primary tale | ents or strengths | ? | | |
| | | | | | |
| 4. What do you consider the applic | cant's chief weakne | ess? | | | |



PERMISSION FORM

| I,, parent/guardian | |
|---|--|
| hereby give my permission for him/her to participate in | the activities sponsored by the Chamber |
| of Commerce of West Alabama. I understand such acti | ivities may include, but are not limited to, |
| classes, field trips and lectures. I represent and agree th | nat my child/ward is physically fit with no |
| known medical conditions or disabilities that would pre- | event or impair his or her ability to engage |
| in the activities associated with this program. I understa | and that my child will be arriving on time |
| and will have transportation to each session. I hereby a | igree to, on behalf of myself and my |
| child/ward, hold the Chamber of Commerce of West A | labama and its affiliates and associates |
| harmless from any liability arising out of my child's/wa | ard's participation. |
| D 41' 1 C | 20 |
| Done thisday of | 20 |
| | |
| Signade | |
| Signed:(Denote / Cooperation) | |
| (Parent/Guardian) |) |



Emergency Contact Information

| Student Full Name: | | |
|--------------------------|--------|--|
| High School: | | |
| Emergency Contact #1 | | |
| Name: | Phone: | |
| Relationship to student: | | |
| Emergency Contact #2 | | |
| Name: | Phone: | |
| Relationship to student: | | |