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## Personal Information



|  |  |  |  |
| --- | --- | --- | --- |
| Full Name: |  |  |  |
|  | First | Last |  |
| Home Address: |  |  |
|  | Street Address Apartment/Unit # City/Zip |  |
| Phone: |  | Email | : |

## Work Information

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Title: |  |  |  | Occupation: |  |
| Employer: |  | Work Telephone:  |  |

|  |  |
| --- | --- |
| WorkAddress |  |

 *Street Address Apartment/Unit # City/Zip*

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Which address do you prefer to receive mail? Home Work

## Education

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| High School: |  |  | College: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Degree: \_\_\_\_\_\_\_\_\_\_ |
|  |

## Academy

|  |
| --- |
| What do you hope to gain from participating in Knoxville Leadership Academy?  |

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

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Are you interested in serving on a City of Knoxville board or commission? \_\_\_\_\_\_\_\_\_ If so, which one?\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |
| --- | --- | --- |
|  |  | Participants are expected to attend all seminars. Absences are allowed only in cases of emergencies and unavoidable business conflicts. Failure to attend at least 4 seminars will result in a participant not completing the program. Are you willing to fulfill the attendance requirements? Yes No  |
| Signature: |  | Date: |  |