

Lead the Ville 2024/2025 Application
Personal Information
First Name
Last Name
Cell Phone
Home Address
Age (select category)
18-29
30-39
40-49
50-59
60+
Email Address
Years in the Estherville Area
0-1
1-5
5-10
10+
Employment Information
Current Employer

Supervisor's Name and title or "self" if self-employed ______

Current Job title _____

Employed here since: (list the year) ______

Employer Phone Number _____

Leadership Information

List any organizations you are or have been involved with (community, civic, religious, professional)

The Lead the Ville advisory board is intentional about choosing a diverse group of participants each year. What unique qualities, strengths, and/or perspectives would you bring to this year's cohort?

What do you hope to gain from your experience through Lead the Ville?

How did you hear about Lead the Ville?

Referral from a friend ____

Digital Media (social, website, etc) _____

Recommendation from a coworker or supervisor _____

Estherville Chamber of Commerce _____

Other _____

I understand the purpose of Lead the Ville, and if I am selected, will devote the time and resources necessary to complete the program. Even though emergencies do arise, I understand the attendance expectations and recognize that I may not be eligible to graduate or receive a tuition refund if I do not meet the program guidelines.

I authorize the Chamber to use my name and image for marketing and program information.

Sign_____ Date_____