

Saline Leadership Institute

Individuals Building a Community of Inspired Leaders

Class of 2011 Application Form

To register for the Saline Leadership Institute program, please complete this application form and mail it to:

Saline Leadership Institute c/o Saline District Library 555 N. Maple Road Saline, Michigan 48176



Or fax to: (734) 944-0600 Or email to: leslee@saline.lib.mi.us

Name:				
Employer or Sponsoring Organization	:			
Job Title or Leadership Position:				
Home Mailing Address:				
City:	Sta	te: Zip Code:		
Day Phone:	Evening	Evening Phone:		
Cell Phone:	Fax Nui	Fax Number:		
E-mail Address:				
Community Involvement:				
<u>Organization</u>	<u>Dates</u>	<u>Involvement</u>		

Saline Leadership Institute

Class of 2011 Application Form (continued)

Please provide answers to the following questions. Your answers will help us to better meet the needs of our participants.

1.	What is each individual's responsibility in improving the quality of life in our community?
2.	Why do you want to participate in the Saline Leadership Institute? What do you hope to learn?
I, th	ne undersigned, agree to the following:
	To attend the kick-off retreat on April 28-29, 2011, and at least 7 of the 9 monthly training sessions to receive a Certificate of Completion.
C	My employer, sponsoring non-profit organization, or I agree to pay the \$495 tuition within 10 days of notification of acceptance into the program or two payments of \$250 each with the second payment due before June 1, 2010.
	Tuition payment checks are to be made payable to "CQC" with the attendee's name on the memo line. Mail to: Saline Leadership Institute c/o Saline District Library, 555 North Maple Road, Saline, MI 48176.
	acknowledge that photos will be taken during the sessions and may be used in SLI publica- ions, articles and/or the website.
Sia	nature Date