GREATER MUSKOGEE AREA CHAMBER & COMMERCE





LEADERSHIP MUSKOGEE 2.0 IS A PROGRAM DESIGNED TO HELP LEADERSHIP MUSKOGEE GRADUATES REINTEGRATE INTO THE MUSKOGEE COMMUNITY. THIS FOUR SESSION PROGRAM WILL HELP BUILD PROFESSIONAL DEVELOPMENT AND PARTICIPANTS WILL LEARN NEW UPDATES AND PROGRAMS IN MUSKOGEE.

Application Process

In order to be considered for selection to 2024 Leadership Muskogee 2.0 applicants must complete all items in this form. Applicants must have completed Leadership Muskogee Class 28 or prior to be eligible.

All applications must be received no later than 5:00 p.m., JULY 19, 2024. Please turn application into info@muskogeechamber.org, or to the Chamber Office (310 W Broadway). You will be notified of the selection committee's decision no later than July 26, 2024.

Tuition

Tuition for the program is \$500 for Chamber Members and \$650.00 for Non-Chamber Members. Tuition covers all program costs, materials, and meals.

Program Commitment

We know that Leadership Muskogee 2.0 participants are all incredibly busy people. Graduates of our program include physicians, school principals, mothers of newborns, chief executive officers, government employees and many other heavily-scheduled professionals. Before applying, it is critical that you commit to your fullest to making each session a priority.

(Please initial) I am able to attend all four sessions to successful as a Leadership Muskogee 2.0 member and alu	
I understand that completion of this application	does not ensure my acceptance in the class.
I have the approval and consent of my employe	er to participate in Leadership Muskogee 2.0.
l understand the commitments above and agree application.	to be bound by them in signing this
SESSION DA All sessions will begin at 8:30am and co	
Session 1: Thursday Session 2: Thursday, S Session 3: Thursday,	eptember 12
Session 4 & Graduation: The	
Applicant Signature:	
Employer Signature:	Date:

(verifies the Employer's understanding of attendance)

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Participant Information

Name (first, middle, last):		
Home Mailing Address:	Home Phone:	
City and Zip Code:	Cell Phone:	_
Primary Email:		
Emergency Contact:Name	 Phone	
Name	PHONE	
Graduate of Leadership Muskogee Class:		
(If class number not know, ple	ease list year attended)	
Employer:		
Title:	Length of Employment:	
Volunteer and Common Please list your civic, religious, political, social or oth (Note locations if other than Muskogee.) Organization		