



# Application for Class 37

## 2023 - 2024

Leadership Santa Cruz County envisions a future in which Santa Cruz County residents are active and well-informed participants in civic affairs. We represent the rich diversity of our County and working together cooperatively for the good of all.

**Please provide the following:**

Name

---

---

Cell \_\_\_\_\_ Email \_\_\_\_\_ Please provide us with links or user names to your social media contact information (Facebook, Twitter, LinkedIn, etc):

---

**Current Employment Information:**

Company Name	Work Phone	Work Email	
Company Address	City	State	Zip
Type of Business	Your Position	Time with this company	

Briefly describe your responsibilities:

---

How did you find out about Leadership Santa Cruz County?

---

Why do you wish to participate in the Leadership Santa Cruz County program?

---

How do you hoped to use the skills and knowledge gained from this leadership program?

---

Please list community civic, professional or social organizations in which you have participated or would be interested in participating (include name of organization and description of involvement or desired involvement.)

---

Partial Scholarships are available to individuals who cannot otherwise attend the program. If you need a partial scholarship, please state your reasons below:

---

---

**TUITION for Leadership Santa Cruz County - \$1,400**

**SPONSORED TUITION:** I have the support and commitment of my employer or a sponsoring organization to attend LSCC.

> **Employer/Sponsoring Organization Contact Info:**

Organization \_\_\_\_\_ Contact Name \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

**INDEPENDENT APPLICANT TUITION:** I am an independent applicant, not sponsored by any company or organization to attend Leadership Santa Cruz County. Please select one of the following payment options:

**Pay In Full now**

**Payment Plan** (\$500 with application and remaining payments by February 1st of the Class Year)

**By signing this application, I acknowledge that I have been furnished with a class schedule and I am available to participate fully. I agree to the above terms of payment for my LSCC tuition. If I do not adhere to these terms, I may be dropped from the LSCC program. Withdrawal from the program following confirmation to participate will result in forfeiture of tuition unless an alternate is confirmed prior to the first session. I also provide consent to use any photos from the class that may include me in them to be used for public promotion from LSCC.**

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

**SPONSORSHIP OPPORTUNITY:** If you or your business/organization would like to help sponsor Leadership Santa Cruz County in any way, please check this box and you will be contacted regarding this opportunity.

**Submit completed applications by email or mail to the addresses below. Payments can be made online via [www.leadershipsantacruzcounty.org](http://www.leadershipsantacruzcounty.org) or by check made payable to: Leadership Santa Cruz County.**

**Mail: Leadership Santa Cruz County, P.O. Box 588 Capitola, CA 95010, Email: [lscdirector@gmail.com](mailto:lscdirector@gmail.com)**

**Web: [www.leadershipsantacruzcounty.org](http://www.leadershipsantacruzcounty.org).**