

2019 Rural Communities Water Managers Leadership Institute

Application to Participate in the Leadership Institute

Self-Help Enterprises (SHE) is conducting a Leadership Institute in Visalia, CA. With this signed application, we accept your commitment to attend all trainings, in as far as possible.

Name: _____

Mailing Address: _____

City: _____ State: _____ ZIP: _____

Email: _____ Home Phone: _____

Business Phone: _____ May we contact you at work? Yes No

Best Time to Contact You: Morning Afternoon Evening

Name of Community: _____

Which of the following best describes your role in the community?

- Board Member (including President, Vice President, Treasurer, Secretary)
- Staff Member (including General Manager, Secretary, Bookkeeper, etc.)
- Community Resident (not on Board)
- Other: _____

Please indicate any special needs, dietary requirements or if you have a disability and may need some accommodation in order to participate fully in the program.

Upon acceptance of this program, I give permission for SHE to use my name in press releases as well as post my photo on the SHE website.

Signature

Date

Please complete the **Participant Questionnaire** on the back of this page. →

Participant Questionnaire

The following questions will help us develop a brief “biography” that will be shared with the leadership cohort. Note that this program does not require that you already have extensive leadership experience just that you have interest in and motivation to participate fully in this program.

1. How long have you lived in this community?

2. How long have you been a board member, staff member, or active community member?

3. Please describe any other leadership experiences in your community, at work/school and home:

4. Do you currently participate in any regional water management programs/planning activities (e.g. SGMA or IRWM)?

Yes No

5. If yes, what role do you serve?

Board Member

Advisory Committee or Other Committee Member

Attend Meetings

Other: _____

6. Why are you interested in participating in the Leadership Institute?

7. Please provide name and contact information for any other residents, board members, or staff members who may be interested in participating in the Leadership Institute.

Name: _____ Phone/Email: _____

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Completed applications may be sent to Eva Dominguez by email at: EvaD@SelfHelpEnterprises.org
or by mail at: *Self-Help Enterprises, Attn: Eva Dominguez, P.O. Box 6520, Visalia, CA 93290.*