

Leadership Academy

Application Form

Submit application by: October 1, 2013

***Personal Information***

**Name:**

**[ ] Male [ ] Female**

**Address:**

**Home telephone:**

**Email:**

***Professional Information***

**Current employer:**

**Position: Length of time with employer:**

**Address:**

**City: State: Zip:**

**Office telephone: Cell phone:**

**Email:**

**Date of CPA License:**

**AKCPA Member: [ ] Yes**

***Sponsor***

**All leadership academy candidates must be sponsored by an employer, educator, or state society member.**

**Name:**

**Office telephone:**

**Email:**

***Professional Volunteer Activities***

**Organization:**

**Committee/Purpose:**

**Office Held:**

**Achievements:**

***Community Volunteer Activities***

**Organization:**

**Committee/Purpose:**

**Office Held:**

**Achievements:**

***Presentations, Honors, Awards and Other Achievements***

***Why do you want to participate in the AKCPA Leadership Academy?***

***Additional Information***

***Practice Area***

* **Academia**
* **Business & Industry**
* **Consulting**
* **Government**
* **Public Accounting**
* **Small <10**
* **Medium 10-24**
* **Large 25+**

**Expectations of Leadership Academy Participants:**

1. Complete assignments
2. Participants agree to volunteer for service on an AKCPA Committee or task force
3. Participants agree to mentor future Leadership Academy class participants

I have read and understand the above expectation statement:

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Participant Signature Sponsor Signature

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_