



# BEAUFORT, SC

REGIONAL CHAMBER OF COMMERCE

## The Leadership Beaufort Program Class of 2025 – 40<sup>th</sup> Class of the Program

### PROGRAM CALENDAR

Leadership Beaufort's Class of 2025 will usually meet the first Friday of every month between October 2024 and April 2025, usually from 8:00 a.m. to 5:00 p.m. at various locations. The program begins and ends with a weekend retreat and **the cost is \$ 995.** Some partial scholarships **may** be available. **Do not send payment with your application.** The tentative schedule is:

Orientation – 5:30 – 6:30 pm	<b>Wednesday, August 14, 2024</b>
Leadership Retreat Weekend	<b>September 6-8, 2024</b>
Session 1 History & Quality of Life	<b>October 4, 2024</b>
Session 2 Environment	<b>November 1, 2024</b>
Session 3 Economy	<b>December 6, 2024</b>
Session 4 Public Services & Health	<b>January 10, 2025</b>
Session 5 Law	<b>February 7, 2025</b>
Session 6 Education	<b>March 7, 2025</b>
Session 7 Government	<b>April 4, 20245</b>
Leadership Retreat Weekend	<b>May 2-4, 2025</b>
Graduation Dinner	<b>Wednesday, May 7, 2025 (evening)</b>

### ATTENDANCE POLICY

Attendance at both retreats is **mandatory.** Participants cannot miss more than one monthly session and successfully complete the program. (But may make up sessions in a subsequent year) Sessions **typically** last from 8 am to 5 pm. Participants are expected to attend the **entire** day's session, including **lunch.**

### SELECTION CRITERIA

We are looking for a diverse group in hopes of reflecting the population of the greater Beaufort area. This would include a variety of age groups, cultures, men and women, persons new to the area as well as long-time residents, different professions, etc. If someone is not chosen as a participant in this year's class, they are encouraged to reapply in another year. Applicant interviews will be held during the month of June, with the class anticipated to be announced by July 2024. **Must be at least 18 years old and work and/or live in Beaufort County.**

Several alternates will be chosen and are quite often placed closer to the September retreat. **No alternates will be placed after the first retreat.**

Partial scholarship funds **may** be available – please contact Connie Hipp (843) 812-6822 cell for more information.

## LEADERSHIP BEAUFORT APPLICATION

Name \_\_\_\_\_ Prefer to be called \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ County \_\_\_\_\_

Phone (home) \_\_\_\_\_ (work) \_\_\_\_\_ (cell) \_\_\_\_\_ (fax) \_\_\_\_\_

Email \_\_\_\_\_ Ethnicity \_\_\_\_\_

Birth date \_\_\_\_\_ Number of Years in Beaufort Region \_\_\_\_\_

How did you find out about Leadership Beaufort? \_\_\_\_\_

### **EMPLOYMENT**

Employer \_\_\_\_\_ Title \_\_\_\_\_

Employed since \_\_\_\_\_ Supervisor/Title \_\_\_\_\_

Describe your responsibilities \_\_\_\_\_

### **PREVIOUS PROFESSIONAL EMPLOYMENT**

Three most recent - include dates.

### **EDUCATION**

High School \_\_\_\_\_ Degree and Year \_\_\_\_\_

Post Secondary \_\_\_\_\_ Degree and Year \_\_\_\_\_

Other \_\_\_\_\_

Will your firm/institution provide the necessary support should you be selected? \_\_\_\_\_ Yes \_\_\_\_\_ No

Will financial assistance be necessary for you to participate? \_\_\_\_\_ Yes \_\_\_\_\_ No

### **COMMUNITY INVOLVEMENT**

Local/State/Regional - List membership and offices held in key professional, civic, social and political organizations.

**Organization**

**Offices Held**

**Dates**

<b><u>Organization</u></b>	<b><u>Offices Held</u></b>	<b><u>Dates</u></b>

(OVER)

What is the most significant thing you have learned from your community/volunteer involvement? \_\_\_\_\_

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List any honors you have received \_\_\_\_\_

How have you demonstrated leadership in the following areas? (A & B)

A) Volunteerism in your community (100 words or less) \_\_\_\_\_

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B) Your professional field (100 words or less) \_\_\_\_\_

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What do you hope to gain from Leadership Beaufort? \_\_\_\_\_

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What do you hope to contribute to the Leadership Beaufort program? \_\_\_\_\_

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**My Personal commitment to the program: I plan to participate in all activities planned for this program and understand the attendance policy and selection objectives.**

Signature \_\_\_\_\_

**APPLICATION MUST BE RETURNED TO THE BEAUFORT REGIONAL CHAMBER OF COMMERCE  
OFFICE NO LATER THAN 1:00 p.m. on Thursday, May 23, 2024**

If you are mailing your application, please mail in enough time to be received by the 23rd.

If you have any questions about the program, please feel free to contact  
Connie Hipp conniehipp1@gmail.com or her cell 843.812.6822

Mailing address: Beaufort Regional Chamber of Commerce  
P.O. Box 910, Beaufort, SC 29901

Deliver to Street Address: 1106 Carteret Street, Beaufort, SC 29902

**Or you may email your application to Connie Hipp at the address above**