



Leadership Candidate Application

Name _____

Address _____

Phone Number (____) _____ Email (required) _____

Club _____ County _____ District _____

Number of years in NCECA _____

List ECA offices held in the last five years:

- Local
- County
- District
- State

List ECA committees served on. Mark with * if you chaired:

- Local
- County
- District
- State

*For each of the following, please include **only** activities within the last five years.*

List leadership in planning sessions for ECA or other NCCE programs.

List special training received through NCCE. Include Master programs.

List workshops or programs you conducted, number of people reached and the impacts realized.

Describe in your own words on a separate sheet, "The personal value of ECA to me." Emphasize tangible and intangible values, satisfaction gained through diverse opportunities and personal growth. You may want to include honors, awards, participation in and officers held in other organizations, special community service opportunities, family information, special interests and hobbies.

Attach a recommendation from ECA Liaison Agent.

Signature _____

Date _____