

Leadership Central Delaware Class of 2027 Application



The diamond program of the
Central Delaware Chamber of Commerce

APPLICANT INFORMATION

Last Name: _____ First Name: _____ M.I.: _____

Address: _____ Apartment/Unit: _____

City: _____ State: _____ Zip: _____ DOB: _____

Cell#: _____ Email: _____

Preferred Mailing Address: _____ Home _____ Work | Food Allergies: _____

Drivers License Number & State of Issue (DAFB Flight) _____

BUSINESS/ORGANIZATION INFORMATION

Company: _____ Work#: _____

Address: _____ Suite/Unit: _____

City: _____ State, Zip: _____ Start Date: _____

Job Title: _____

Professional Responsibilities: _____

DEMOGRAPHIC QUESTIONS

Completing the following two questions is voluntary. This information will be helpful to ensure the diversity of the class. Please circle the option that best fits you below:

Age Range: Under 25 | 25-30 | 31-40 | 41-50 | 51+

Ethnicity: African American | Asian/Pacific Islander | Caucasian | Latino | Other: _____

PERSONAL DATA

How long have you lived in Central Delaware?

How did you hear about Leadership Central Delaware?

Please describe your reason(s) for applying to the Leadership Central Delaware program and what you hope to gain from the program.

What are your hobbies or interests?

Where did you go to school? (List high schools, colleges, business or trade schools and any other specialized programs. Include the city, state, dates attended and major/degree).

LEADERSHIP SKILLS

Please describe a time when you have been engaged in a community project, initiative, cause or organization (professional or community) that has been fulfilling. The following questions may serve as a guide. *How have you contributed to the success of someone, a group or an organization? In what ways has this involvement affected you? What was your role?*

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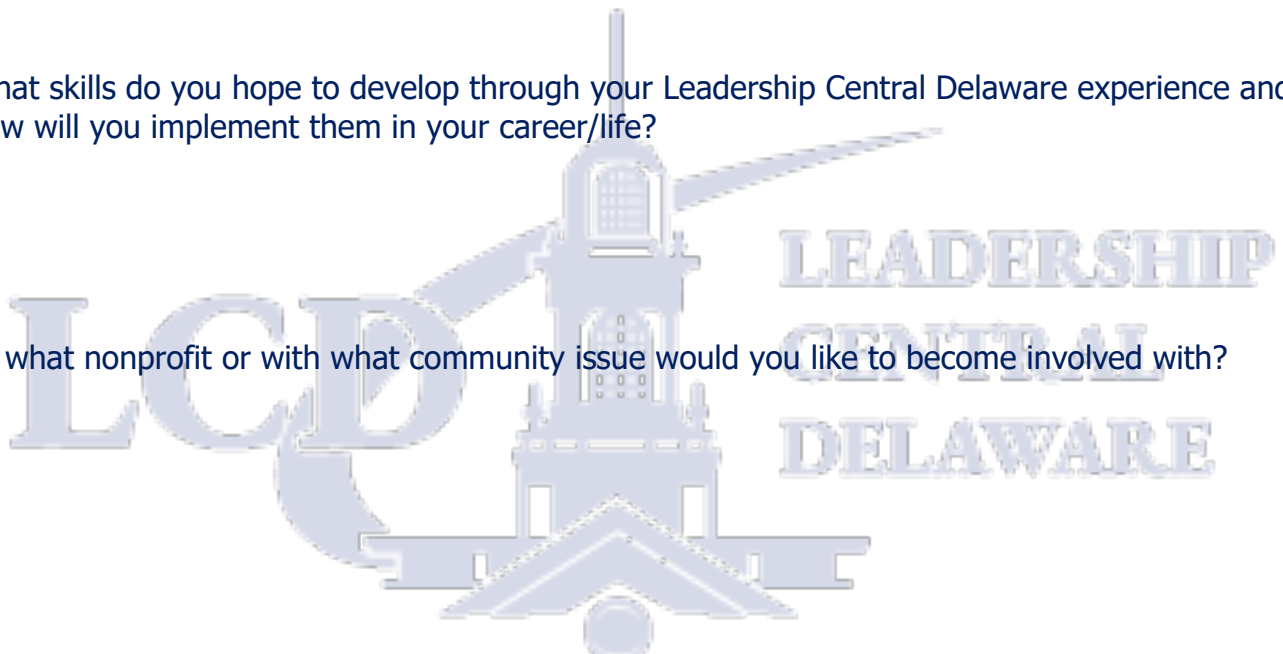
(LEADERSHIP SKILLS CONTINUED)

What do you consider your highest responsibility, skill, or career achievement to date?

What leadership skills do you feel are your strengths?

What skills do you hope to develop through your Leadership Central Delaware experience and how will you implement them in your career/life?

In what nonprofit or with what community issue would you like to become involved with?



LEADERSHIP CENTRAL DELAWARE PARTNERSHIPS

The LCD program proudly partners with **Wilmington University**. The university is pleased to award 3 graduate credits to class members who successfully complete LCD and graduate from this program.

The LCD also partners with **Leadership Delaware, Inc. (LDI)**, an intensive, fast-moving leadership experience that expands knowledge statewide. LCD graduates who are recommended to LDI by the CDCC will receive a discount in the amount of LCD's tuition towards tuition for LDI. All regular LDI application procedures are required.

PROGRAM POLICIES

CLASS ATTENDANCE: YOU ARE REQUIRED TO ATTEND ALL PROGRAM SESSIONS AND COMPLETE ALL RESEARCH/ASSIGNMENTS TO PREPARE FOR EACH SESSION. The opening retreat is mandatory. You are required to attend all programs in their entirety from 8:00am – 5:30pm. In case of major illness, catastrophe or extenuating circumstances, an absence from other sessions may be excused by the LCD Steering Committee. If you miss 2 unexcused days, a letter of warning will be sent to you. Any time missed over the 2 unexcused days will be grounds for dismissal from the program. However, upon your request, a hearing can be held with the LCD Steering Committee to discuss your absences. The LCD Steering Committee will make the final determination regarding your participation in the program. If you are not able to make any part of the day, prior notice must be received. IF YOU MISS MORE THAN ONE HOUR OF THE DAY IT WILL BE COUNTED AS HALF A DAY ABSENT. In the event that you miss more than 2 days you will be removed from the program; tuition is not refundable or transferrable.

PARTICIPATION: Participation is required in the LCD Leadership Book activities, the CDCC Holiday Gift Auction, and the LCD Community Service Project. If you do not partake in some degree with above events; 1 attendance day will be taken away from the 2 that are allotted. Circumstances will be evaluated and decided upon by the LCD Steering Committee.

DRESS CODE: The Leadership Central Delaware program expects participants to dress appropriately in business/business casual attire. Because our program is in the forefront of our business community, professional business/business casual attire is essential. Business/business casual attire includes suits, pants, jackets, shirts, skirts and dresses that, while not formal, are appropriate for a business environment. Jeans, t-shirts, and footwear such as flip-flops and sneakers are not appropriate for “business casual” attire. LCD participants are expected to demonstrate good judgment and professional taste. While choosing appropriate attire, keep in mind the professional image you wish to display, as well as a high level of courtesy/respect towards guest speakers and classmates. ALWAYS REMEMBER: you are representing your business/organization, Leadership Central Delaware, the Central Delaware Chamber of Commerce, and YOURSELF!

CELL PHONE USAGE: It is required that all cell phones be either turned off or placed on mute during sessions. Ample time will be given during breaks and lunch to allow for messages to be checked and calls to be returned. Other devices such as laptops, iPad, etc. are not permitted during class time.

INCLEMENT WEATHER: In the event that weather is inclement, you will receive an email and/or cell phone text by 7:00am to notify all participants of a canceled or delayed session. However, sessions will only be canceled under extreme circumstances. If weather is bad but the program is being held, late arrival to ensure your safety is, of course, excused.

I, _____, understand and agree to the above policies for the Leadership Central Delaware Program. I also understand that failure to abide by these policies can result in the review of my participation or termination in the program by the Leadership Central Delaware Director and Steering Committee.

COMMITMENT FORM

If accepted into the program, you or your sponsor will need to pay the full tuition prior to the start of the opening retreat - September 2026. The \$2,250 tuition covers all program costs including room and meals for the overnight retreat. Please note that all times, dates, locations, etc., are subject to change.

1. Party Responsible for tuition payment (circle one):

Company/Organization | Individual Participant

If sponsoring company or organization is responsible for payment:

Contact Person: _____

Title: _____

Phone: _____

Email: _____

2. Are you a non-sponsored individual (sole proprietor or nonprofit representative with an annual operating budget under \$500,00) requesting a partial scholarship? (circle one):

Yes | No

If yes, please enclose a formal written request expressing your need. Scholarships are reviewed/rewarded on a case by case basis and determined by Leadership Central Delaware.

3. By signing below, both you and your employer/organization understand:
 - The purpose of Leadership Central Delaware and, if selected, will devote the time and resources to complete the program. This also includes volunteering for the class's community service project and at the annual CDCC Gift Auction held in October 2026.
 - The commitment includes a two-day retreat in September, 9 session days (the first Thursday of each month, October through June), a graduation ceremony at the CDCC Awards for Excellence Dinner in June and a one day closing retreat.
 - Attendance is mandatory, and tuition is not refundable upon withdrawal from the program.

EMPLOYER (IF APPLICABLE)

This application has the approval and full support of the organization including the time required to successfully complete the program as outlined above. I confirm that our organization will contribute \$ _____ toward the applicant’s tuition. For applicants who answer directly to a board of directors, such as an executive director of a non-profit organization, please have the board president or chair sign.

Employer Signature: _____ Date: _____

Applicant Signature: _____ Date: _____

Return completed application by May 29, 2026 to:

Dina C. Vendetti, President
Central Delaware Chamber of Commerce
435 North DuPont Highway
Dover, Delaware 19901
dvendetti@cdcc.net | 302.734.7513



FOR CDCC ORGANIZATIONAL USE ONLY

Applicant interview scheduled for: _____

Interview notes:

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Accepted into LCD Class of 2027 _____ | Denied acceptance into LCD Class of 2027 _____

Program Director Signature: _____ Date: _____